AGENDA
BOARD OF EXAMINERS FOR NURSING
Department of Public Health
410 Capitol Avenue, Hartford, CT
Third Floor – Hearing Room
May 20, 2020 - 8:30 AM

Chair Updates
Open Forum
Additional Agenda Items and Reordering of Agenda
National Council of State Boards of Nursing - *Update*

MINUTES
April 15, 2020

SCOPE OF PRACTICE INQUIRIES
April 2020

SCHOOL ISSUES
- *Excelsior College*
- *South Dakota State University*
- *NCLEX Test Results*
- *Lincoln Technical Institute*
    1. *Virtual clinical experiences*
    2. *Program Administer Status Report*
    3. *Approval of Director of Nursing – New Britain Campus*
- *Porter & Chester Institute*

MEMORANDA OF DECISION
- *Rene Cottrill, RN - Petition No. 2019-896*
- *Melissa Eccles, LPN - Petition No. 2018-123*
- *Dana Kendrick, RN – Reinstatement Request*
- *Tammy Piccirillo, LPN - Petition No. 2019-839*
- *Amy Seplica, RN – Petition No. 2018-1418*

MOTIONS FOR SUMMARY SUSPENSION

• *Kimberly Lemire, RN*	*Petition No: 2019-1237*	*Staff Attorney Joelle Newton*
• *Kimberly R. Smith, LPN*	*Petition No: 2019-592*	*Staff Attorney Joelle Newton*
• *Sara J. Smith, LPN*	*Petition No: 2020-373*	*Staff Attorney Joelle Newton*

PREHEARING REVIEW

• *Stephen Keller, RN*	*Petition No. 2017-1112*	*Staff Attorney Diane Wilan*

CONSENT ORDERS

• *Sashni Popp, RN*	*Petition No. 2018-530*	*Staff Attorney Diane Wilan*
• *Sara Scobie, LPN*	*Petition No. 2018-1365*	*Staff Attorney Diane Wilan*

HEARINGS

• *Collen Gallagher, LPN*	*Petition No: 2020-76*	*Staff Attorney Linda Fazzina*
• *Karina Francis, RN*	*Petition No: 2020-157*	*Staff Attorney Brittany Allen*

This meeting will be held by telephone conference.
The call in number for the meeting is 1-877-653-5974. The passcode is 10619990.

The following minutes are draft minutes which are subject to revision and which have not yet been adopted by the Board.

The **Board of Examiners for Nursing** held a meeting by telephone conference on April 15, 2020 originating from the Department of Public Health 410 Capitol Avenue, Hartford, Connecticut in the third floor hearing room.

BOARD MEMBERS PRESENT*:*	Patricia C. Bouffard, RN, Chair – via telephone Jason Blando, Public Member – via telephone Mary M. Brown, RN –via telephone Elizaida Delgado, LPN – via telephone Mary Dietmann, RN – via telephone Lisa S. Freeman, Public Member – via telephone Jennifer Long, APRN – via telephone Geraldine Marrocco, RN – via telephone Gina M. Reiners, RN – via telephone
BOARD MEMBERS ABSENT:	None
ALSO PRESENT:	Stacy Schulman, Legal Counsel to the Board, DPH – via telephone Dana Dalton, RN, Supervising Nurse Consultant, DPH – via telephone Helen Smith, RN, Nurse Consultant, DPH – via telephone Brittany Allen, Staff Attorney, DPH – via telephone Joelle Newton, Staff Attorney, DPH – via telephone Jeffrey Kardys, Board Liaison, DPH – via telephone Agnieszka Salek, Hearings Liaison, DPH – via telephone

The meeting commenced at 8:30 a.m.

CHAIR UPDATES

Nothing to Report

OPEN FORUM

Attorney Joan Feldman, Shipman and Goodwin inquired as to whether the March 18, 2020 board meeting was recorded pursuant to Executive Order 7B.
Board Liaison Jeffrey Kardys reported that a recording was not made.

NATIONAL COUNCIL STATE BOARDS OF NURSING

Chair Bouffard and Dana Dalton reported on the mid-year meeting they attended in Boston from March 3-5, 2020.

MINUTES

Gina M. Reiners made a motion, seconded by Mary Dietmann, to approve the minutes from March 18, 2020. The motion passed with all in favor except Mary Brown who abstained.

SCHOOL ISSUES

COVID-19

- Connecticut League for Nursing – Expansion of Alternate Clinical Placement

The Board had discussion with representatives from the Connecticut League for Nursing and Council of Deans & Directors members regarding issues resulting from restrictions related to COVID-19 and the impact on clinical training for nursing students in registered nurse programs, and the impact on NCLEX testing.
Geraldine Marrocco made a motion, seconded by Mary Dietmann, that the Board support registered nurse educational programs in good standing efforts to exercise maximum flexibility using creative clinical educational methods (not to exceed more than 50% in total overall clinical hours) to meet the program outcomes of students enrolled in nursing programs until the restrictions are lifted for clinical settings due to COVID -19. The motion passed unanimously.

- NCLEX Testing

There was discussion regarding the closure of testing facilities in Connecticut due the COVID-19 pandemic.
The Board strongly suggested that DPH investigate this situation and communicate to the National Council of State Boards of Nursing and the Governor's Office that these centers are essential and need to be opened to accommodate the 2020 pool of nursing graduates.

- Nurses Education Statistics

Marsha Proto, Connecticut League for Nursing presented statistics for the pre-licensure registered nurse and practical nurse programs in Connecticut.

- Lincoln Technical Institute – Request to use virtual clinical experiences

Patricia DeLucia was present on behalf of Lincoln Technical Institute.
Geraldine Marrocco made a motion, seconded by Mary Dietmann, to recommend to the Commissioner of the Department of Public Health, the waiver of the requirements of section 20-90-55 of the Regulations of Connecticut State Agencies and approve the contingency plan put forth by Lincoln Tech. to complete the clinical requirement for those students graduating in May and July 2020. (The plan replaces a portion of the required 750 hours of direct patient care with virtual clinical experiences). The motion passed unanimously.

Porter & Chester Institute – Plan of Correction – Monthly update

Debra Hessell, Philip Krebes, Nancy Brunette, Elizabeth Rodriguez, Jay Bologa, Sherry Greifzu; and Joan Feldman, Esq. were present by telephone on behalf of Porter & Chester.
Helen Smith, RN, Nurse Consultant, DPH reported on information submitted by Porter & Chester since the March 18, 2020 meeting.
Ms. Hessel and Ms. Greifzu addressed the issues that have been a concern at Porter & Chester.
A student from Porter & Chester also addressed the Board.
The Board requested that comments by Ms. Hessel and Ms. Greifzu be reduced to writing and sent to the Board.

MEMORANDUM OF DECISION

Brian Gross, RN - Petition No. 2019-536

Gina Reiner made a motion, seconded by Mary Dietmann, to affirm the Board's decision revoking the registered nurse license of Brian Gross. The motion passed unanimously.

Laura Kisatsky, RN - Petition No. 2018-1416

Gina Reiner made a motion, seconded by Mary Dietmann, to adopt the Memorandum of Decision, as edited, which extends the period of probation of Ms. Kisatsky's registered nurse license. The motion passed unanimously.

Danielle Miranda, RN - Petition No. 2019-87

Jennifer Long made a motion, seconded by Mary Dietmann, to adopt the Memorandum of Decision which imposes probation of Ms. Miranda's registered nurse license for a period of four years. The motion passed unanimously.

There was discussion concerning the ability of nurses who are on probation, during the COVID-19 pandemic, being able to comply with probationary terms that require attendance at meetings and/or submitting to random observed screening. Attorney Schulman and Dana Dalton indicated that the Department of Public Health is looking into these issues.

Charlene Zikaras, RN - Petition No. 2019-522
Gina Reiner made a motion, seconded by Mary Brown, to adopt the Memorandum of Decision, as edited, which imposes a three month suspension, probation for a period of four years and a $200.00 civil penalty. The motion passed unanimously.

MOTION FOR SUMMARY SUSPENSION

Heather Spaulding, RN - Petition No. 2019-1224
Staff Attorney Joelle Newton presented the Board with a Motion for Summary Suspension for Heather Spaulding. Ms. Spaulding was not present and was not represented.
Mary Brown moved to grant the Department's Motion for Summary Suspension in that respondent's continued practice as a nurse is a clear and immediate danger to public health, safety and welfare. The motion was seconded by Geraldine Marrocco and passed unanimously. A hearing will be scheduled for May 20, 2020.

CONSENT ORDERS

Carissa Kelly, RN, APRN - Petition No: 2019-1025
Joelle Newton, Staff Attorney, Department of Public Health presented a Consent Order in the matter of Carissa Kelly, RN.
Ms. Kelly was not present and was not represented by counsel.
Gina Reiners moved, and Mary Dietmann seconded, to approve the Consent Order which imposes a reprimand. The motion passed unanimously.

Milagros Narido, RN - Petition No: 2019-1055
Joelle Newton, Staff Attorney, Department of Public Health presented a Consent Order in the matter of Milagros Narido, RN.
Ms. Narido was not present and was not represented by counsel.
Mary Brown moved, and Gina Reiners seconded, to approve the Consent Order. The motion passed unanimously. Chair Bouffard signed the Order which imposes a reprimand and probation for a period of one year.

PREHEARING REVIEW

Kimberly Smith, RN - Petition No: 2019-592
Joelle Newton, Staff Attorney, Department of Public Health presented a prehearing review packet in the matter of Kimberly Smith, RN.
Ms. Smith was not present and was not represented by counsel.
Due to insufficient information to make a decision, the Board recommended that the Department consider filing a motion for Summary Suspension and that this matter be scheduled for a hearing.

ADJOURNMENT

It was the unanimous decision of the Board Members present to adjourn this meeting at 12:35 p.m.

Patricia C. Bouffard, D.N.Sc., Chair
Board of Examiners for Nursing

BOEN meeting 05/20/2020

- **For Your Information:**
  - The Accreditation Commission for Education in Nursing (ACEN) denied continuing accreditation to the Associate Degree Nursing program at Excelsior College on 03/18-19/2020. The College has appealed the decision and in accordance with ACEN Policy #10 Appeal Process this Associate Degree Nursing program will remain accredited pending the appeal process.

  - As of 05/04/2020 South Dakota State University (SDSU) will provide an option for participants in the RN & LPN Refresher program to complete online simulation for the required clinical experience. This option is temporary, and the participants cannot have any current disciplinary action(s) with their Board of Nursing including orders, stipulation agreements or probationary terms.

- **NCLEX test results:** for the time period of 05/01/2019 to 04/30/2020.
  - **Please note:**
    - Porter & Chester Institute's Rocky Hill day program and Stratford evening program were placed on Conditional Approval due to the NCLEX test results during the 06/19/2019 BOEN meeting. PCI has identified inaccurate candidate information for candidates from their Rocky Hill and Stratford campuses and NCSBN was informed.
    - Stone Academy's West Haven day program was placed on Conditional Approval due to the NCLEX test results during the 06/19/2019 BOEN meeting.
    - Quinnipiac University has identified inaccurate candidate information, and NCSBN was informed.

- **Lincoln Technical Institute (LTI):**
  - Additional information regarding virtual clinical experiences.
  - A status report for Dr. Deborah Little in her role as Program Administrator of the Practical Nursing Program for LTI (appointed 11/20/2019 and the BOEN requested an update) is included along with the organizational charts for LTI Connecticut and LTI Corporate.
  - Request for approval of the appointment **Mr. Salvatore Diaz, RN, MSN** to the position of Director of Nursing for the LTI Practical Nursing Program at the New Britain campus (as of 04/13/2020). Mr. Diaz earned a Bachelor of Science in Nursing from Western Connecticut State University in May of 2001 and a Master of Science in Nursing from the University of Hartford, in May of 2007. His clinical experiences include staff nurse, nurse manager, off shift nurse administrator clinical informatics nurse specialist/analyst, director of clinical informatics and

Regional Director of Nursing for the CT Department of Corrections. His educational experiences include Nursing Program Manager and Director of distance education for New England Technical Institute from 10/2003 to 05/2006.

- **Porter & Chester Institute (PCI):**
  - Information that was discussed during the 04/15/2020 BOEN meeting.
  - Request to offer virtual clinical simulation.
  - Response to the NCLEX results.

Accreditation Commission for Education in Nursing (ACEN)
www.acenursing.org

Disclosure Statement Regarding the Status of
The Associate Degree Nursing Program at Excelsior College
Albany, New York

Updated April 28, 2020, by the ACEN

The following publicly available information is provided by the Accreditation Commission for Education in Nursing (ACEN) concerning the accreditation of the associate degree nursing program at Excelsior College, 7 Columbia Circle, Albany, NY 12203. Information presented below is in accordance with ACEN Policy #5 Notification of Commission Decisions; ACEN staff cannot comment further on questions specifically related to the associate degree nursing program at Excelsior College.

What is the accreditation status of the associate degree nursing program at Excelsior College? On March 18-19, 2020, the ACEN Board of Commissioners voted to deny continuing accreditation to the associate degree nursing program at Excelsior College. On April 20, 2020, Excelsior College appealed the decision and the required intent to appeal fee and the administrative appeal fee was received on April 27, 2020 in accordance with ACEN Policy #10 Appeal Process and Submission and Review of New Financial Information Subsequent to Adverse Action. The associate degree nursing program will remain accredited with the status of continuing accreditation for good cause in accordance with Policy #10 pending the appeal process.

What will happen next? Excelsior College is required to pay the appeal process fee within 45 calendar days of the submission of the notice of intent to appeal and required intent to appeal fee and the administrative appeal fee. The appeal will be considered withdrawn if the program fails to submit the appeal process fee within 45 calendar days of the submission of the notice of intent to appeal. The Appeal Hearing will not be scheduled until the appeal process fee has been paid in full. If Excelsior College submits the appeal process fee within 45 calendar days of the submission of the notice of intent to appeal, then the Appeal Hearing will be scheduled per the process and timeline outlined in ACEN Policy #10 and the associate degree nursing program at Excelsior College will remain accredited with a status of continuing accreditation for good cause until the Appeal Committee renders its decision. If Excelsior College does not submit the appeal process fee by that date, then the decision of the ACEN Board of Commissioners to deny continuing accreditation to the associate degree nursing program at Excelsior College and remove the program from the list of ACEN accredited programs is effective April 20, 2020.

For information about denial of continuing accreditation or the appeals process, see ACEN Policy #4 Types of Commission Actions for Initial and Continuing Accreditation and ACEN Policy #10 Appeal Process and Submission and Review of New Financial Information Subsequent to Adverse Action.

Access the ACEN Accreditation Manual for additional information regarding the ACEN accreditation process.

Why did the ACEN Board of Commissioners vote to deny continuing accreditation to the associate degree nursing program at Excelsior College? The ACEN Board of Commissioners voted to deny continuing accreditation for failure to comply with Standard 4 Curriculum, Criterion 4.9, and Standard 6 Outcomes, Criterion 6.2, of the ACEN Standards and Criteria. Standard 4 expects the curriculum to support the achievement of the end-of-program

student learning outcomes and program outcomes and is consistent with safe practice in contemporary healthcare environments. Criterion 4.9 expects student clinical experiences and practice learning environments are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the end-of-program student learning outcomes. Standard 6 expects that program evaluation demonstrates that students have achieved each end-of-program student learning outcome and each program outcome. Criterion 6.2 expects the program demonstrates evidence of graduates' achievement on the licensure examination.

Access the ACEN Standards and Criteria to read the full text of the Standards and Criteria cited above.

ACEN
Accreditation Commission for Education in Nursing

Search ACEN Accredited Nursing Programs

SEARCH RESULTS

EXCELSIOR COLLEGE
School of Nursing

7 Columbia Circle
Albany, NY 12203

Nurse Administrator:
Mary Lee Pollard, PhD, RN
Dean, School of Nursing
Email:mpollard@excelsior.edu
Phone:(518)464-8707

ASSOCIATE

Accreditation Status

GOV ID: 496

Initial Accreditation:	June 1975
Date of Most Recent Commission Action:	March 2020
	Disclosure Statement *Updated 04/28/20*
Current Accreditation Status:	Accredited
Accreditation Stipulations:	Good Cause
Date of Last Visit:	October 24-26, 2019
Next Site Visit:	

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EXCELSIOR COLLEGE
School of Nursing

7 Columbia Circle
Albany, NY 12203

Nurse Administrator:
Mary Lee Pollard, PhD, RN

MASTER'S

Accreditation Status

GOV ID: 496

Initial Accreditation:	October 2002
Date of Most Recent Commission Action:	March 2019
Current Accreditation Status:	Accredited
Accreditation Stipulations:	None

Dean, School of Nursing
Email:mpollard@excelsior.edu
Phone:(518)464-8707

Date of Last Visit: March 31-April 2, 2016
Next Site Visit: Spring 2024

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EXCELSIOR COLLEGE

School of Nursing

7 Columbia Circle
Albany, NY 12203

Nurse Administrator:
Mary Lee Pollard, PhD, RN
Dean, School of Nursing
Email:mpollard@excelsior.edu
Phone:(518)464-8707

BACCALAUREATE

Accreditation Status

GOV ID: 496
Initial Accreditation: April 1981
Date of Most Recent Commission Action: March 2019

Current Accreditation Status: Accredited
Accreditation Stipulations: None

Date of Last Visit: March 31-April 2, 2016
Next Site Visit: Spring 2024

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CONTACT INFO

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Atlanta, GA 30326
P. (404) 975-5000
F. (404) 975-5020

Email: info@acenursing.org

Web: www.acenursing.org

Smith, Helen

From: Brown, Deborah M.
Sent: Tuesday, April 28, 2020 7:55 AM
To: Smith, Helen
Subject: Fw: SDSU Nursing Refresher Course - Online Clinical Simulation Option
Attachments: RN SIM Syllabus.pdf; LPN SIM syllabus.pdf

Helen,

Please see the email below from South Dakota State University (SDSU). They want to offer a virtual clinical component for the refresher programs. Could you please respond to this inquiry? Thank you.

Deb

Deborah M. Brown
Health Program Associate
Practitioner Licensing and Investigations Section
Connecticut Department of Public Health
410 Capitol Avenue, MS #12 APP
Hartford, Connecticut 06134
P: (860) 509-7590 | F: (860) 707-1984

Let us know how we are doing: Survey

From: SDSU Continuing Nursing Education <SDSU.ContinuingNursingEducation@sdstate.edu>
Sent: Monday, April 27, 2020 5:02 PM
To: SDSU Continuing Nursing Education
Subject: SDSU Nursing Refresher Course - Online Clinical Simulation Option

Dear Board of Nursing, Attention Director of Education and Licensing;

During this time of COVID-19, South Dakota State University (SDSU) has researched providing online simulation for the required clinical experience for refresher course participants. While we are hopeful that healthcare providers can again open their doors to clinical students in the near future, when this can happen remains uncertain. Course faculty have received the approval from SDSU and the South Dakota Board of Nursing (BON) to offer, develop and deliver the clinical experience via online simulation utilizing Assessment Technologies Institute (ATI).

Please see the attached course syllabi for the RN and LPN Independent Study Refresher Courses Online Simulation Clinical. We respectfully ask your BON to review this option available for RN and LPN course participants to complete the program, and subsequently apply for licensure in your state. SDSU is ready to open the course to participants on May 4, 2020 and first groups of participants would complete before June 30, 2020.

If not already licensed in their home state, completing the course with online clinical simulation will allow the participant to be eligible for a single state license in the state of South Dakota (SD). The participant may choose to activate this license, and potentially use it to practice in their home state during this time of COVID-19 due to emergency declarations accepting out-of-state licensures. Depending upon your state's Nurse Compact status and/or BON rules , it is possible some participants could activate the single state SD license and request endorsement from SD back to their home state. For others, it is possible this avenue may not meet the requirements of licensure in your state and may have

reinstatement requirements yet to meet. While giving participants the option to complete online clinical simulation, SDSU has clearly indicated that rules for licensure are different per state, and directed participants to contact their representative BON for licensure questions.

SDSU looks forward to the opportunity to continue to serve nurses in your state. Please contact me with any questions regarding this temporary offering of clinical simulation to assist in returning your nurses to active practice.

Stay healthy –
Linda

SOUTH DAKOTA STATE UNIVERSITY

Linda Lemme
Coordinator of Continuing Nursing Education
College of Nursing
Wagner 207, Box 2275
Brookings, SD 57007
P: (605) 688-5745
www.sdstate.edu/nursing/refresher-course-rn
www.sdstate.edu/nursing/refresher-course-lpn

SOUTH DAKOTA STATE UNIVERSITY
College of Nursing

Continuing Nursing Education
Independent Study Refresher Course

RN Simulation Clinical Syllabus

Clinical Structure

The online simulation clinical component is composed of a minimum of 80 hours of virtual simulation clinical practice, provided through patient care scenarios utilizing Assessment Technologies Institute (ATI). In-depth simulation scenarios require participant interaction resulting in a unique, individual experience. The clinical experience is directed, observed, and evaluated by course Faculty.

Participant Learning Outcomes (PLOs)

After completion of each of the five simulation lessons, the participant will be able to:

1. Complete an accurate and effective Situation, Background, Assessment, Recommendation (SBAR) communication
2. Apply knowledge, skills, and clinical reasoning to identify and prioritize client problems
3. Use clinical reasoning to develop a plan of care to promote optimal client outcomes
4. Provide client education regarding the treatment and management of clients with select health problems
5. Enhance clinical judgment by identifying nursing actions and interventions to address client problems
6. Use evidence-based resources as a basis for providing client care.

Before Beginning the Clinical Component

Participants eligible for online simulation clinical component will meet the following requirements:

1. Completed the theory component of the Independent Study RN Refresher Course
2. Have no current disciplinary action(s) with their current Board of Nursing (orders, stipulation agreements, probationary terms, etc)
3. Have been previously licensed as an RN and experienced hands-on patient care as an RN, both in the United States.
4. Elected the option of online simulation clinical instead of a hands-on patient care experience with a health care provider under the direction and supervision of a preceptor, and communicated this intent with the CNE office no later than one week prior to the scheduled start date.

Beginning Clinical

Participant Tasks prior to each of the five (5) Real Life Scenarios (est 5 hours for each scenario)

The participant will review content related to the topic of the assigned scenario and complete the following sections on the System Disorder Active Learning Template (ALT):

a. Pathophysiology related to client problem
b. Assessment – list anticipated findings (4 sections)

c. Patient-Centered Care – list anticipated activities (sections of medications, therapeutic procedures, interprofessional care)
d. Complications

The participant will develop an anticipated plan of care for a client experiencing the condition in the scenario.

a. Complete sections on the System Disorder Active Learning Template (ALT):
    - Alterations in Health (Diagnosis) – identify top Nursing Diagnosis
    - Health Promotion and Disease Prevention
    - Safety Considerations
    - Patient-Centered Care (Nursing Care, Client Education)
b. Complete Nursing Skills ALT depicting the priority nursing skill
c. Complete Therapeutic ALT depicting a top procedure for the scenario
d. Complete Diagnostic ALT depicting a top diagnostic procedure for the scenario
e. Complete two Medication ALT describing the top two medications for the scenario

Participant Tasks during each of the five (5) Real Life Scenarios (est 5 hours for each scenario)

The participant will spend a minimum of sixty (60) minutes working within the assigned real life scenario in ATI. As the scenario begins, the participant will 'take report', by stopping and replaying the scenario as needed. S/he will document their report on the designated section of the **Scenario worksheet**.

After report, the participant will document the following items on the **Scenario worksheet**:

- Identify and prioritize the top three client problems noted from the report
- List assessment information to support each priority
- List a nursing diagnosis for each priority
- List appropriate nursing actions and the associated rationale to address each priority
- Review cultural considerations that are appropriate for the scenario

When the real life scenario is completed, the participant will prepare a SBAR to give report to the oncoming nurse. The SBAR will be documented in the designated area of the **Scenario worksheet**. At this time, the participant will also be prepared to describe a clinical situation that s/he has experienced or has knowledge about that relates to the ATI real life scenario and explain potential differences in client care.

After completion of the ATI real life scenario, the participant will review his/her individual ATI report and document their reflection of the client care experience on the **Debriefing worksheet** in the following areas:

- What was done well? What were the strongest areas in the Reasoning Scenario Performance Related to Outcomes, and describe insight for future practice?
    - Body Function
    - NCLEX RN
    - QSEN
- What are opportunities for improvement? What were the weakest areas in the Reasoning Scenario Performance Related to Outcomes, and describe insight for future practice?
    - Body Function
    - NCLEX RN
    - QSEN
- What was surprising about the Decision Log?

Discussion and Reflection for each of the five (5) Real Life Scenarios (est 6 hours for each scenario)

The participant will document the following items on the debriefing worksheet

1. What were some of the challenging decisions made in the scenario?
2. What were some aspects of client care the participant did not feel prepared to make for the scenario and/or after completing the nursing care plan?
3. If a wrong decision was made during the scenario, what led the participant down an incorrect path?
4. Describe three things learned from the scenario and how new knowledge will be applied to future client situations.
5. Reflect on any ethical dilemmas or cultural considerations uncovered during the scenario and describe how response may vary based on the situation.
6. Describe an "Aha" moment experienced during this real life scenario and how it will positively impact future nursing care.

After the participant has completed all five (5) real life clinical scenarios, s/he will enter the fillable document ***Verification of Standards of Practice & Professional Performance*** to document understanding and insight of how each standard of practice was met with their reflection in the comment section. Participants are encouraged to review this document after each scenario and document pertinent information in specific sections, as some real life scenarios may relate to one standard more than another. After all scenarios are completed, the participant will revisit the document to review initial comments and compose his/her final reflection of each standard.

Submission of Assignments

The participant will refer to the RN SIM Schedule located in D2L under Start Here to review the schedule for assignments. Weekly assignments are due within D2L utilizing the Drop Box feature. Each real life scenario will have a corresponding Drop Box as outlined on this schedule. Participants electing to complete clinical through online clinical simulation must adhere to this clinical schedule. There will be no adjustments to assignment deadlines and Zoom debriefing meetings.

Submission of assignments in D2L Drop Box are a participants "ticket to class". This verifies that pre-work has been completed before the group debriefing session. If assignments are not submitted according to schedule, the participant will be notified via email and may be removed from the online clinical simulation class.

Participants are responsible for uploading assignments into the correct D2L Drop Box. Each Drop Box is labeled to correspond with each of the five (5) clinical scenarios (COPD, GI bleed, Kidney, UTI and MI). Assignments to be uploaded to Drop Box include the following for each real life scenario:

- ALT System Disorder
- ALT Nursing Skills
- ALT Therapeutic Procedure
- ALT Diagnostic Procedure
- ALT Medication
- SIM Scenario worksheet
- SIM Debriefing worksheet

The participant will submit his/her completed ***RN Verification of Standards of Practice & Professional Performance*** evaluation with their comments in final D2L drop box within one week after completing the

final debriefing, followed with an email to course Faculty requesting to schedule the individual final debriefing meeting via Zoom.

Evaluation Procedure for the Clinical Component

Each real life scenario will be evaluated based on ATI score report and assignments submitted to D2L followed by a final debriefing of simulation and course activity as follows:

- Score Report: Individual (usage in minutes/repetitive effort)
- Active Learning Templates (completed for each scenario)
- SIM Scenario Worksheet (completed for each scenario)
- SIM Debriefing Worksheet (completed for each scenario and posted detailed, well-organized, professional responses to instructor questions 1-6. Response displays insight and is of acceptable length)

Final Debriefing will consist of a scheduled Zoom meeting between participant and course Faculty to review the following items:

- Each scenario completion
- Verification of Standards of Practice & Professional Performance:
    - Review each section that was completed by participant (participant reflection was detailed, well-organized, and thoughtful responses to the standard).
    - Instructor will review feedback added to each standard and offer time for participant to ask questions/seek clarification.
- Review of course performance

If the overall clinical performance is unsatisfactory, the CNE Program Coordinator will determine if further experience beyond the online simulation clinical experience is needed or if dismissal from the program is in order.

If the participant is unable to successfully complete the clinical portion of the course, either online simulation or hands-on patient care, this will result in failure of the refresher course. Appeals to have the opportunity to retake clinicals are not guaranteed and will be handled on a case-by-case basis. No more than two opportunities to successfully complete clinicals will be allowed.

Course Completion

Both the theory and clinical components must be successfully completed to pass the Nursing Refresher Course. Upon successful completion, a certificate of completion will be sent via US Mail to the participant's address of record. A copy of the certificate will be sent to the Board of Nursing (BON) to document successful completion of the course.

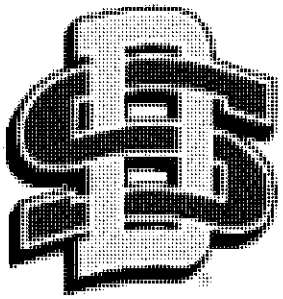
Completion of the Nursing Refresher Course with online clinical simulation will allow the participant to apply for a single state South Dakota (SD) Registered Nurse license with the SD Board of Nursing (BON). The participant may also be eligible for licensure with their respective BON, based upon the BONs rules. SDSU does not guarantee the completion of the course utilizing online clinical simulation will meet each BON rule for licensure, and the participant is responsible for verifying this information and their course activity with their BON.

Americans with Disabilities Act Statement

Any student who feels s/he may need an accommodation based on the impact of a disability should contact the Coordinator of Disability Services (605-688-4504 or Fax, 605-688-4987) to privately discuss your specific needs.

Questions and Assistance

Contact the Continuing Nursing Education office at 605-688-5745 or SDSU.ContinuingNursingEducation@sdstate.edu for questions or assistance.



Created/Last Updated: April 2020 JMS & LL
Questions regarding Content, Examinations or Enrollment should be addressed to the Coordinator, Continuing Nursing Education
PH (605) 688-5745 or FAX to (605) 688-6679
Continuing Nursing Education

SOUTH DAKOTA STATE UNIVERSITY
College of Nursing

Continuing Nursing Education
Independent Study Refresher Course

LPN Simulation Clinical Syllabus

Clinical Structure

The online simulation clinical component is composed of a minimum of 80 hours of virtual simulation clinical practice, provided through patient care scenarios utilizing Assessment Technologies Institute (ATI). In-depth simulation scenarios require participant interaction resulting in a unique, individual experience. The clinical experience is directed, observed, and evaluated by course Faculty.

Participant Learning Outcomes (PLOs)

After completion of each of the five simulation lessons, the participant will be able to:

1. Complete an accurate and effective Situation, Background, Assessment, Recommendation (SBAR) communication
2. Apply knowledge, skills, and clinical reasoning to identify and prioritize client problems
3. Use clinical reasoning to implement a plan of care to promote optimal client outcomes
4. Provide client education regarding the treatment and management of clients with select health problems
5. Enhance clinical judgment by identifying nursing actions and interventions to address client problems
6. Use evidence-based resources as a basis for providing client care.

Before Beginning the Clinical Component

Participants eligible for online simulation clinical component will meet the following requirements:

1. Completed the theory component of the Independent Study LPN Refresher Course
2. Have no current disciplinary action(s) with their current Board of Nursing (orders, stipulation agreements, probationary terms, etc)
3. Have been previously licensed as an LPN and experienced hands-on care as an LPN, both within the United States
4. Elected the option of online simulation clinical instead of a hands-on patient care experience with a health care provider under the direction and supervision of a preceptor, and communicated this intent with the CNE office no later than one week prior to the scheduled start date.

Beginning Clinical

Participant Tasks prior to each of the five (5) Real Life Scenarios (est 5 hours for each scenario)

The participant will review content related to the topic of the assigned scenario and complete the following sections on the System Disorder Active Learning Template (ALT):

a. Pathophysiology related to client problem
b. Assessment – list anticipated findings (4 sections)

c. Patient-Centered Care – list anticipated activities (sections of medications, therapeutic procedures, interprofessional care)
d. Complications

The participant will develop an anticipated plan of care for a client experiencing the condition in the scenario.

a. Complete sections on the System Disorder Active Learning Template (ALT):
    - Alterations in Health (Diagnosis) – identify top Nursing Diagnosis
    - Health Promotion and Disease Prevention
    - Safety Considerations
    - Patient-Centered Care (Nursing Care, Client Education)
b. Complete Nursing Skills ALT depicting the priority nursing skill
c. Complete Therapeutic ALT depicting a top procedure for the scenario
d. Complete Diagnostic ALT depicting a top diagnostic procedure for the scenario
e. Complete two Medication ALT describing the top two medications for the scenario

Participant Tasks during each of the five (5) Real Life Scenarios (est 5 hours for each scenario)

The participant will spend a minimum of sixty (60) minutes working within the assigned real life scenario in ATI. As the scenario begins, the participant will 'take report', by stopping and replaying the scenario as needed. S/he will document their report on the designated section of the **Scenario worksheet**.

After report, the participant will document the following items on the **Scenario worksheet**:

- Identify and prioritize the top three client problems noted from the report
- List assessment information to support each priority
- List a nursing diagnosis for each priority
- List appropriate nursing actions and the associated rationale to address each priority
- Review cultural considerations that are appropriate for the scenario

When the real life scenario is completed, the participant will prepare a SBAR to give report to the oncoming nurse. The SBAR will be documented in the designated area of the **Scenario worksheet**. At this time, the participant will also be prepared to describe a clinical situation that s/he has experienced or has knowledge about that relates to the ATI real life scenario and explain potential differences in client care.

After completion of the ATI real life scenario, the participant will review his/her individual ATI report and document their reflection of the client care experience on the **Debriefing worksheet** in the following areas:

- What was done well? What were the strongest areas in the Reasoning Scenario Performance Related to Outcomes, and describe insight for future practice?
    - Body Function
    - NCLEX
    - QSEN
- What are opportunities for improvement? What were the weakest areas in the Reasoning Scenario Performance Related to Outcomes, and describe insight for future practice?
    - Body Function
    - NCLEX
    - QSEN
- What was surprising about the Decision Log?

Discussion and Reflection for each of the five (5) Real Life Scenarios (est 6 hours for each scenario)

The participant will document the following items on the debriefing worksheet

1. What were some of the challenging decisions made in the scenario?
2. What were some aspects of client care the participant did not feel prepared to make for the scenario and/or after completing the nursing care plan?
3. If a wrong decision was made during the scenario, what led the participant down an incorrect path?
4. Describe three things learned from the scenario and how new knowledge will be applied to future client situations.
5. Reflect on any ethical dilemmas or cultural considerations uncovered during the scenario and describe how response may vary based on the situation.
6. Describe an "Aha" moment experienced during this real life scenario and how it will positively impact future nursing care.

After the participant has completed all five (5) real life clinical scenarios, s/he will enter the fillable document ***Verification of Standards of Practice & Criteria*** to document understanding and insight of how each standard of practice was met with their reflection in the comment section. Participants are encouraged to review this document after each scenario and document pertinent information in specific sections, as some real life scenarios may relate to one standard more than another. After all scenarios are completed, the participant will revisit the document to review initial comments and compose his/her final reflection of each standard.

Submission of Assignments

The participant will refer to the LPN SIM Schedule located in D2L under Start Here to review the schedule for assignments. Weekly assignments are due within D2L utilizing the Drop Box feature. Each real life scenario will have a corresponding Drop Box as outlined on this schedule. Participants electing to complete clinical through online clinical simulation must adhere to this clinical schedule. There will be no adjustments to assignment deadlines and Zoom debriefing meetings.

Submission of assignments in D2L Drop Box are a participant's "ticket to class". This verifies that pre-work has been completed before the group debriefing session. If assignments are not submitted according to schedule, the participant will be notified via email and may be removed from the online clinical simulation class.

Participants are responsible for uploading assignments into the correct D2L Drop Box. Each Drop Box is labeled to correspond with each of the five (5) clinical scenarios (COPD, GI bleed, Kidney, UTI and MI). Assignments to be uploaded to Drop Box include the following for each real life scenario:

- ALT System Disorder
- ALT Nursing Skills
- ALT Therapeutic Procedure
- ALT Diagnostic Procedure
- ALT Medication
- SIM Scenario worksheet
- SIM Debriefing worksheet

The participant will submit his/her completed ***Verification of Standards of Practice & Criteria*** evaluation with their comments in final D2L drop box within one week after completing the final debriefing, followed with an email to course Faculty requesting to schedule the individual final debriefing meeting via Zoom.

Evaluation Procedure for the Clinical Component

Each real life scenario will be evaluated based on ATI score report and assignments submitted to D2L followed by a final debriefing of simulation and course activity as follows:

- Score Report: Individual (usage in minutes/repetitive effort)
- Active Learning Templates (completed for each scenario)
- SIM Scenario Worksheet (completed for each scenario)
- SIM Debriefing Worksheet (completed for each scenario and posted detailed, well-organized, professional responses to instructor questions 1-6. Response displays insight and is of acceptable length)

Final Debriefing will consist of a scheduled Zoom meeting between participant and course Faculty to review the following items:

- Each scenario completion
- Verification of Standards of Practice & Criteria:
    - Review each section that was completed by participant (participant reflection was detailed, well-organized, and thoughtful responses to the standard).
    - Instructor will review feedback added to each standard and offer time for participant to ask questions/seek clarification.
- Review of course performance

If the overall clinical performance is unsatisfactory, the CNE Program Coordinator will determine if further experience beyond the online simulation clinical experience is needed or if dismissal from the program is in order.

If the participant is unable to successfully complete the clinical portion of the course, either online simulation or hands-on patient care, this will result in failure of the refresher course. Appeals to have the opportunity to retake clinicals are not guaranteed and will be handled on a case-by-case basis. No more than two opportunities to successfully complete clinicals will be allowed.

Course Completion

Both the theory and clinical components must be successfully completed to pass the Nursing Refresher Course. Upon successful completion, a certificate of completion will be sent via US Mail to the participant's address of record. A copy of the certificate will be sent to the Board of Nursing (BON) to document successful completion of the course.

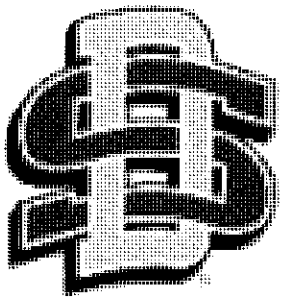
Completion of the Nursing Refresher Course with online clinical simulation will allow the participant to apply for a single state South Dakota (SD) Registered Nurse license with the SD Board of Nursing (BON). The participant may also be eligible for licensure with their respective BON, based upon the BONs rules. SDSU does not guarantee the completion of the course utilizing online clinical simulation will meet each BON rule for licensure, and the participant is responsible for verifying this information and their course activity with their BON.

Americans with Disabilities Act Statement

Any student who feels s/he may need an accommodation based on the impact of a disability should contact the Coordinator of Disability Services (605-688-4504 or Fax, 605-688-4987) to privately discuss your specific needs.

Questions and Assistance

Contact the Continuing Nursing Education office at 605-688-5745 or SDSU.ContinuingNursingEducation@sdstate.edu for questions or assistance.



Created/Last Updated: April 2020 JMS & LL
Questions regarding Content, Examinations or Enrollment should be addressed to the Coordinator, Continuing Nursing Education
PH (605) 688-5745 or FAX to (605) 688-6679
Continuing Nursing Education

NCLEX-RN **First Time Candidates % Passed**	**2018**	**2018**	**2019**	**2019**	**2020**	**2020**
MASTERS						
Yale School of Nursing	98		94		98	
BACCALAUREATE	**BS**	**Accelerated**	**BS**	**Accelerated**	**BS**	**Accelerated**
Central CT State University	90		100		97	
Fairfield University	93	91	93	98	97	98
Quinnipiac University	92	89	94	96	90 *	94 *
Sacred Heart University	97		99		92	
Southern CT State University	95	98	100	97	95	100
University of Bridgeport **First graduating class in 2020**	N/A		N/A		No data	
University of Connecticut						
Groton Campus/CEIN		100		97		97
Stamford Campus/CEIN		92		94		78
Storrs Campus	92	95	98	98	98	100
Waterbury Campus/CEIN		100		100		97
University of Saint Joseph	96	90	95	88	96	97
Western CT State University	88		94		92	
ASSOCIATE DEGREE	**Day**	**Evening**	**Day**			
Capital CC*	92		89		87	
Gateway CC*	91		91		88	
Goodwin University	82		80		85	
Naugatuck Valley CC*	95		98		94	
Northwestern CC*	93		90		90	
Norwalk CC*	85		95		91	
ST. Vincent's College	86	80	82		85	
Three Rivers CC*	99		93		92	
(* Community Colleges)						

NCLEX-PN First Time Candidates % Passed	CAMPUS	2018 Day	2018 Evening	2019 Day	2019 Evening	2020 Day	2020 Evening
LINCOLN TECHNICAL INSTITUTE	NEW BRITAIN	97	88	95	100	95	89
	SHELTON	90	83	89	91	84	86
PORTER and CHESTER INSTITUTE	BRANFORD	100	N/A	Closed 2019	Closed 2019	N/A	N/A
	ENFIELD	100	100	94	100	100	100
	HAMDEN-OPEN 2019			100	83	63	50
	ROCKY HILL	93	N/A	79	100	70 *	71 *
	STRATFORD	75	N/A	85	50	86 *	77 *
	WATERBURY	81	100	80	89	90	88
STONE ACADEMY	EAST HARTFORD	87	96	84	93	73	84
	WATERBURY			N/A	N/A	100	No data
	WEST HAVEN	93	78	71	93	48	80

***= Results may change based on request from schools to correct candidate information. Will update the BOEN if any results change.**

LINCOLN TECH®

GROUP OF SCHOOLS

Lincoln Technical Institute ■ Lincoln College of Technology
Lincoln Culinary Institute ■ Euphoria Institute of Beauty Arts & Sciences

May 6, 2020

Patricia Bouffard D.N.Sc., RN
Chair, Board of Examiners for Nursing
Department of Public Health
410 Capitol Avenue
PO Box 340308 - MS#13 PHO
Hartford, CT 06134-0308

Dear Dr. Bouffard,

On behalf of Lincoln Technical Institute (LTI), I am submitting our COVID Contingency Plan that describes modifications to the curriculum delivery method for the Practical Nursing program. As you are aware, in response to the COVID-19 health emergency, we have transitioned from our current in-person classroom modality to online distance education that went into effect on March 16, 2020. The change to online learning incorporates alternate teaching/learning strategies and web-based resources to ensure our students achieve established learning outcomes.

The plan also incorporates virtual clinical for the Mod IV students as per the Board's decision at the April 15th meeting that permits on-time graduation for those students who have completed over 85% of clinical contact hours prior to cancellation of student clinical rotations by the clinical affiliation agencies. Likewise, web-based learning activities, online skills modules, and virtual simulation will be used to satisfy clinical requirements. The remaining Mods I, II, and III students are engaged in distance education for theory classes only until such time that it is feasibly safe for them to return to on-site clinical. The plan will be for the nursing programs in the New Britain and Shelton campuses during this temporary period of the pandemic. Additional information is available upon request.

Kind Regards,

Deborah Little

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973-736-9340 (office) / 201-927-0724 (mobile)

cc: Francis Giglio, SVP Compliance & Regulatory
Marie Acker, Group Vice President
Karla Dzwonkowski, Campus President, New Britain
Susan Naples, Campus President, Shelton
Ami Bhandari, Senior Vice President, Education & Strategy
Patricia DeLucia MSN, RN, Corporate Dean of Nursing

Lincoln Technical Institute

CT Practical Nursing Programs: New Britain and Shelton Campuses

COVID Contingency Plan for Curriculum Change

RATIONALE FOR CURRICULUM CHANGE AND IMPACT ON STUDENTS

The Practical Nursing Program's curriculum revisions are being implemented for 2 primary reasons. First is to ensure that the curriculum and course student learning objectives are delivered in an effective and systematic method that is consistent with the achievement of program outcomes during the COVID-19 healthcare crisis. The second reason for the curriculum change is to proactively address the negative impact of state mandated on-site school closures on student progression within the nursing program and subsequent abrupt cessation in education, as well as delays in NCLEX testing.

The principal revision to the curriculum is in the delivery method that transitions student learning from face-to-face to online distance education. All theory courses transitioned to online learning beginning the week of March 16, 2020. The curriculum revision is not a change in our currently established nursing program philosophy, mission, vision, conceptual framework, course descriptions, course objectives, or end-of-program student learning outcomes. The curriculum change also represents a comprehensive modification to incorporate virtual clinical as an alternative student learning method in lieu of on-site clinical practicums for Mod IV students who have completed greater than 85% of on-site clinical and which has been accepted by the Connecticut Board of Examiners for Nursing (BOEN) at the April 15, 2020 Board meeting. (***See Attachments C, D, E: Temporary Syllabi for COVID – PN136A, PN138A, and PN142A for Mod 4 Clinical Courses)***. Lincoln Technical Institute submits this COVID Contingency Plan addressing the curriculum changes, consistent with regulation 20-90-47: (c) (1) (B): (d) (1) (A-E), on a conditional basis for up to one year, or as soon as it is feasibly safe for students to resume on-site learning at clinical healthcare agencies with lessening of the pandemic social distancing measures and sufficient supply of personal protective equipment (PPE), including N95 facemasks, that currently prevent students from providing care in long-term healthcare facilities.

In a joint news release by the National Council of State Boards of Nursing (NCSBN) and the National League for Nursing (NLN), with endorsement from 8 other major nursing organizations, a call was issued for nursing schools to offer maximum flexibility so students in pre-licensure programs may graduate on time this spring and contribute to the workforce during the COVID-19 outbreak. Specific to the state of Connecticut, COVID-19 infections have spread to residents in nearly half of the state's nursing homes. In response to the deaths of nursing home residents from COVID-19 illness accounting for approximately 33% of the state's total deaths, Governor Lamont has signed an executive order to establish COVID Recovery Facilities in nursing homes throughout the state. The nursing staff in long-term care facilities are primarily Licensed Practical Nurses (LPNs) and with shortages of nursing staff already identified, a need for increased numbers of LPNs are needed to fill the pipeline. Nursing programs are challenged to find pathways for student completion of academic requirements that facilitate graduates to enter the workforce and provide safe, quality care during the COVID pandemic.

It is also important to note that the change to the curriculum's delivery method for both theory and clinical has been fully and successfully implemented in all other of the 5 Lincoln Technical Institute's Practical Nurse programs located in Rhode Island, New Jersey, and Pennsylvania. Early evaluative assessments have demonstrated an increase in student enrichment through augmented student engagement, convenience and flexibility as students are home with children and/or older family members requiring care and attention, as well as online teaching/learning modalities that students find interesting and fun as reported by both students and faculty.

Faculty have reported other beneficial effects of the change in curriculum delivery with online teaching/learning modalities for currently enrolled students. These include real-life scenarios and case studies that continue to stimulate critical thinking and clinical judgment in virtual clinical learning environments that can be easily adapted for individual student learning needs. Additionally, the availability of varied online modalities and resources promote congruency of the end-of-program student learning outcomes with professional nursing standards and guidelines that strengthen the rigor of the curriculum and lead to meaningful evaluation of student learning. The primary benefit of the curriculum change delivery methods on the functions and role of the graduates will be on-time program completion and timely NCLEX testing so graduates are

available to join the healthcare workforce and help in filling the staffing gaps during this critical healthcare crisis.

TIMELINE FOR IMPLEMENTATION OF CURRICULUM CHANGE

Implementation of the BOEN approved curriculum change with virtual clinical experience for the Mod IV day and evening cohorts of the New Britain and Shelton campuses was April 21st. The curriculum changes have been reviewed and received institutional approval by the Compliance and Regulatory Division of Lincoln Educational Services, which were approved by State Boards of Nursing in Rhode Island, New Jersey, and Pennsylvania, and pending recommendation by the Connecticut Board of Examiners for Nursing (BOEN) to the Commissioner of Public Health. As explained in the *Rationale* section of this plan, the implementation steps and timeline for virtual clinical experience have been fully and successfully implemented in all other Lincoln Technical Institute Practical Nurse programs. One addition to the Connecticut nursing program's plan has been the inclusion of assigned faculty mentors to clinical course faculty. Since the inception of virtual clinical experience in the other state nursing programs, there are now identified faculty "super-users" who have been instrumental in supporting the success of distance education within a fairly short time span.

Table 1.1 Curriculum Changes Implementation Timeline describes the required steps for implementation and lists the specific implementation dates and designated person(s) responsible for implementation of the curriculum change, including the approval of virtual clinical for Mod IV students by the CT BOEN at the April 15th Board meeting.

Table 1.1 Curriculum Changes Implementation Timeline		
Required Implementation Steps	**Date**	**Responsible Person(s)**
1. Notifications and communications to students and faculty regarding distance learning during COVID-19 crisis: • Campus Student Consumer Information https://www.lincolntech.edu/campus/new-britain-ct/consumer-info and https://www.lincolntech.edu/campus/shelton-ct/consumer-info • COVID-19 and Lincoln Tech updates https://www.lincolntech.edu/about/press-room/covid-19-and-lincoln-tech • Canvas announcements - weekly messaging from campus presidents and directors • LincAlerts – large group electronic messaging system • President's weekly videos	March 9 and ongoing	Francis Giglio, SVP Compliance & Regulatory Health Communications committee Corporate Administrators Campus Presidents Directors of Nursing at each campus Education Technology Manager
2. Webinar training sessions for faculty	March 16-27	Susan Watts, Education Technology Manager Evolve Elsevier and FA Davis Publishers
3. Syllabi revisions for distance education Syllabi revisions following BOEN April 15th meeting	March 16-27 April 20	Patricia DeLucia, Corp. Dean of Nursing Deborah Little, Corp. Assistant Dean of Nursing
4. Course Lesson Plans revisions	March 16-27 and ongoing	Nursing Faculty at each campus
5. Evaluation of course outcomes at end of each mod.	Ongoing	Nursing Director and Faculty at each campus
6. Assignment of faculty mentors "super users": New Britain Campus - • Laura McKeown BSN, RN, C-EFM • Nadine Brown-Patterson MSN-Ed, RN • Joyce Gorcyka MSN, RN, CEN Shelton Campus - • Janet McCann MPH, BSN, RN • Beth Lucca BSN, RN	April 2	Patricia DeLucia, Corp. Dean of Nursing Deborah Little, Corp. Assistant Dean of Nursing
7. Memorandum notification to students regarding the use of virtual clinical for Mod IV as approved by the CT BOEN.	April 20	Karla Dzwonkowski, Campus President, New Britain Susan Naples, Campus President, Shelton
8. Begin Virtual Clinical for Mod IV students	April 21	Directors of Nursing at each campus
9. Quarterly Progress Report submissions to the BOEN during period of virtual clinical for Mod IV students graduating in May and July 2020.	October 1	Patricia DeLucia, Corp. Dean of Nursing Deborah Little, Corp. Assistant Dean of Nursing

PLAN OF EVALUATION FOR CURRICULUM CHANGE

Course and program outcomes are reviewed regularly for analysis and trending of data. A myriad of methods and tools are currently used to assess achievement of student learning course objectives and end-of-program Student Learning Outcomes (SLOs) in the didactic, skills laboratory, and clinical aspects of each course. The end-of-program SLOs provide the basis for faculty to evaluate student achievement and to implement changes to improve their courses. The Practical Nursing program utilizes quizzes/examinations, grading rubrics, papers, presentations, teaching plans, care plans, written reflection journaling, skills validations, clinical performance evaluations, and standardized testing for formative and summative evaluation of student learning. At the institutional level, there is an academic assessment process that measures student learning at the program level. Assessment of program-level academic outcomes include NCLEX-PN pass rates, program completion rates, and job placement and/or continuing education rates. This current process to track, trend, and analyze course and program evaluative data will continue as usual throughout the period of online distance education.

The principal evaluation method used in didactic courses are examinations in multiple-choice question format that faculty adapt from textbook instructor resources and other sources of NCLEX type questions. Case studies, papers, and presentations are additional evaluative methods used to assess student learning in theory classes. Students participate in standardized assessment with Assessment Technologies Institute (ATI®) at the end of each nursing theory course and a comprehensive predictor assessment at the end of the program. Achievement on proctored assessments applies for a designated percent of the overall course grade. These evaluation methods for didactic courses remain the same with the change to online delivery of course content via the Canvas learning management system (LMS). Teaching/learning methods and resources are specified in the COVID Contingency Resources document. ***See Attachment A, #3, pp. 3-4.*** It is important to note that lockdown browsers and video monitoring are used for all testing with application of Respondus® for course examinations and Proctorio® for standardized testing with ATI.

In addition to the current methods of curriculum assessment for course and program outcomes, there will be the following evaluative processes put into place that will focus on measurement of outcomes for the virtual clinical teaching/learning experience.

For all current Mod IV clinical courses, formative and summative evaluation methods will be used for assessment of virtual clinical learning activities to measure student achievement in synthesis and application of knowledge. These evaluation methods, as defined in #3 of the COVID Contingency Resources document (***Attachment A, pp. 3-4***), include nursing care plans, client teaching plans, guided reflection journaling, SimChart® electronic documentation, synchronous pre-and post-conference through Canvas BigBlueButton Conferences, simulation guided-reflection debriefing, and case studies. Web-based resources, as defined in #5 of the COVID Contingency Resources document (***Attachment A, pp. 6-7***), available within Elsevier Evolve and FA Davis will be used to evaluate how students meet course learning objectives. There will be a particular emphasis on evaluation of safety competencies within each clinical course. These include adherence to National Patient Safety Goals, medication administration, complying with the healthcare institution's policies and procedures, complying with OSHA regulations, accuracy in documentation, demonstrated knowledge to distinguish between normal and abnormal assessment findings, demonstrated ability of decision-making skills and prioritization of care. Each clinical course will also focus on evaluation methods to measure appropriate use of technology and informatics to reduce/ eliminate errors that include accurate documentation of data collection and focused assessments and other client care data into the electronic health record (EHR) and communication with the interdisciplinary healthcare team to provide safe, quality care.

To avoid an abrupt end in the education of the remaining three-hundred students currently in Mods I, II, and III, and as a temporary measure during the COVID-19 pandemic healthcare crisis, clinical courses will not take place and will not be required as prerequisites for theory courses until such time that clinical practicums may resume in the affiliating healthcare agencies. These students have all completed varying hours of on-site clinical.

Table 1.2 Student Completion of Clinical Hours lists the specific number of contact hours completed in on-site clinical practicums to date.

Table 1.2 Student Completion of Clinical Hours

SHELTON CAMPUS

Mod	Days/Evenings	Grad Dates	Number of students in clinical	Number of clinical hours completed as of 3/17 in their current mod	Total program clinical hours until 3/17/2020 out of 750 required
1	Days	02/25/2021	35	18 hours	2.4% (18/750)
2	Days	11/24/2020	37 +1- (1 already completed mod 2 clinical)	27 hours	27.6% (207/750)
3	Days	08/26/2020	38 + 2 (2 completed mod 3 clinical)	36 hours	57.6% (432/750)
4	Days	05/26/2020	34 + 3 (repeating theory already completed clinical)	36 hours	86.4% (648/750)
1	Evenings	11/08/2021	15	21 hours	2.8% (21/750)
2	Evenings	06/01/2021	20 +2 (repeating theory already completed clinical)	52.5 hours	31.5% (236.5/750)
3	Evenings	12/15/2020	13	52.5 hours	60.2% (451.5/750)
4	Evenings	07/13/2020	18 +2 (repeating theory already completed clinical)	52.5 hours	89.7% (672.5/750)

NEW BRITAIN CAMPUS

Mod	Days/Evenings	Grad Dates	Number of students in clinical	Number of clinical hours completed as of 3/17 in their current mod	Total program clinical hours until 3/17 out of 750 required
1	Days	02/25/2021	17	No clinical	0% (0/750)
2	Days	11/24/2020	12	36 hours	29% (216/750)
3	Days	08/26/2020	19	36 hours	57% (428/750)
4	Days	05/26/2020	10	36 hours	86% (644/750)
1	Evenings	11/08/2021	25	21 hours	2.8% (21/750)
2	Evenings	06/01/2021	26	52.5 hours	31.5% (236.5/750)
3	Evenings	12/15/2020	16	52.5 hours	60.2% (451.5/750)
4	Evening	07/13/2020	8	52.5 hours	89.7% (672.5/750)

When students may safely return to the healthcare sites and in particular, with the availability of sufficient personal protective equipment (PPE), clinical courses will be realigned within the curriculum plan. ***See Attachment B: Curriculum Fact Sheet PN.*** Assessment Technologies Institute (ATI) Skills resources, as specified in the COVID Contingency Resources document (***Attachment A***), will continue to be utilized for students in PN105A Clinical Experience/Nursing I, PN117A Clinical Experience/Geriatrics, PN124A Clinical Experience/Well Child, and PN134A Clinical Experience/Sub Acute I courses that provide a focus on fundamental skills acquisition. Upon reopening of the schools, students will participate in a "boot-camp" type of clinical skills lab experience for validation of skills competencies and reinforcement of skills as needed with use of skills performance checklists. The purpose of providing online pedagogies for students to begin learning skills is aimed toward integrating theory with practice. Likewise, clinical case studies and other virtual teaching/learning strategies will be integrated into didactic content so students may begin to learn the application of theoretical concepts until on-site clinical practicums can be resumed. The hours that students engage in online skills education and other virtual clinical learning will not be counted toward clinical hours.

References

Connecticut Department of Public Health. (2020). *Frequently asked questions (FAQs) related to plan for long-term facilities (LTCFs) during COVID-19 pandemic.* Retrieved from https://portal.ct.gov/Office-of-the-Governor/News/Press-Releases/2020/04-2020/Governor-Lamont-Coronavirus-Update-April-11

National Council of State Boards of Nursing and National League for Nursing. (2020). *U.S. nursing leadership supports practice/academic partnerships to assist the nursing workforce during the COVID-19 crisis* (Policy brief, March 27). Retrieved from https://www.ncsbn.org/Policy_Brief_US_Nursing_Leadership_COVID19.pdf

State of Connecticut Governor's Executive Order No. 7Y (April 11, 2020). *Protection of public health and safety during COVID-19 pandemic and response – Nursing home surge plan.* Retrieved from https://portal.ct.gov/-/media/Office-of-the-Governor/Executive-Orders/Lamont-Executive-Orders/Executive-Order-No-7Y.pdf?la=en

ATTACHMENT A: COVID Contingency Resources
Revised 4/17/2020 – revisions are highlighted in blue font

Transition to Online Distance Education for Curriculum Delivery

Item	Actions

1. Faculty Orientation and Training	• March 9-12: Education Technology department designed course training to the CANVAS learning management system (LMS) for faculty. Corporate Education department developed Guide Sheet for available Online Resources. Coordinated messaging to Lincoln Tech faculty, staff, and students.
	• March 13: Education Technology scheduled *Distance Education Training with Canvas* sessions to occur from March 16 through March 20. A second set of training sessions scheduled to occur from March 23 through March 27 for select topics.
	• March 15: Skype meeting of Education Team for final preparations to transition to distance education.
	  • Instructions sheets and campus level training for tools and technologies: Lincoln email (webmail), Skype for phone conferencing, and Canvas LMS requirements for computer and Wi-Fi.
	• March 16: School closed for *Faculty Development Day*
	  • Live training, online courses, and custom training available as needed.
	  • All faculty required to complete 3 self-paced online course modules in Canvas Resources: Canvas orientation, distance learning with Canvas, and teaching online courses with Canvas.
	  • All faculty required to attend an online interactive training session: 3 sessions scheduled daily for day and evening faculty; 1 afternoon and 1 evening sessions scheduled daily for open Q&A and individualized assistance.
	  • Identify faculty experts for support/planning/guidance/brainstorming
	  • Instructional planning: course planning (individual or in teams), begin development of remote assignments, plan for remainder of course (overall and daily), review of Online Resources Guide Sheets, documentation of attendance, documentation of online learning activities

ATTACHMENT A: COVID Contingency Resources
Revised 4/17/2020 – revisions are highlighted in blue font

2. Student Orientation and Training	• March 9-12: Education Technology department designed course training to the CANVAS learning management system (LMS) for students. Coordinated messaging to Lincoln Tech faculty, staff, and students.
	• March 17-18: School closed and begin *Student Orientation and Transition to Online Distance Learning*
	  • Live training, online courses, and custom training provided as needed.
	  • All students required to complete the self-paced online course module in Canvas Resources: Canvas Orientation Course
	  • All students required to attend an online interactive training session:
	  ▪ Review of Canvas Student Guide
	  ▪ Student portal password
	  ▪ Messaging the instructor and checking the Inbox
	  ▪ Accessing uploaded files, PowerPoints, pdfs
	  ▪ CANVAS CONFERENCES for lectures (live or recorded teaching)
	  ▪ Submission of online assignments and grading criteria rubric
	  ▪ Shared video links or website links with corresponding assignments
	  ▪ Discussion threads and grading criteria rubric
	  ▪ Quizzes / Tests through Respondus lockdown browser
	  ▪ Viewing grades for online learning activities
	  ▪ CHAT feature
	  ▪ Canvas Resource Center
	  ▪ Canvas app for mobile phone
	  ▪ Who to contact for assistance during normal business and non-business hours; Canvas Support Hotline and reporting a problem
	  ▪ Important information regarding attendance for distance learning
	  • Students confirm functionality of their technology to engage in online distance learning
	  ▪ Technology equipment and support provided to students as needed
	• March 19: Students complete transition to online distance education

ATTACHMENT A: COVID Contingency Resources
Revised 4/17/2020 – revisions are highlighted in blue font

3. Alternate Teaching/Learning Strategies	Some examples include but not limited to the following:
	• Synchronous lecture delivery
	• Recorded lectures with 14-day access
	• Online assignments to include:
	  ◦ Case studies with written 1-2 page paper and/or questions
	  ◦ YouTube video links with written 1-2 page paper and/or questions
	  ◦ Internet website links with written 1-2 page paper and/or questions
	  ◦ Podcast audio file links with written 1-2 page paper and/or questions
	  ◦ Online assignments graded with criteria-based rubrics
	• Asynchronous discussion forums
	  ◦ Discussion threads: initial (original) post is a direct response to instructor's question(s) and is due no later than Thursday at 11:59 pm of the current week. A second and third post will be a response (reply) to an initial comment posted by either another student or to an additional comment by the instructor. The reply posts are due no later than Sunday at 11:59 pm
	  ◦ Discussion threads graded with criteria-based rubrics.
	• Textbook readings or peer-reviewed journal article readings completed as a pre-class assignment (flipped classroom concept) followed by quizzing for formative assessment and online discussion (BigBlueButton and Kahoot online programs to build custom quizzes or surveys)
	• Synchronous student-teacher video discussions through Canvas Conferencing
	• Chat Canvas course tool to create virtual office hours, conduct group discussions or study sessions.
	• Virtual Clinical Experiences additionally includes:
	  ◦ Synchronous pre- and post-conferences
	  ◦ Virtual Simulation:
	  ▪ Pre-assignments for virtual simulation
	  ▪ Unfolding case studies in virtual simulation
	  ▪ Debriefing sessions post-virtual simulation
	  ◦ Care plans
	  ◦ Concept maps

ATTACHMENT A: COVID Contingency Resources
Revised 4/17/2020 – revisions are highlighted in blue font

	• Teaching plans • Case studies • Reflection journaling • Electronic health record for documentation and medication administration

4. Web-Based Resources for Didactic Content	• Davis Plus/Edge through FA Davis publishers
	  • Student online resources:
	  ▪ e-book with personalized quizzing
	  ▪ Interactive resources that interact with the textbook that include audio case studies and animations
	  ▪ Online references and bibliography
	  ▪ Chapter key points
	  ▪ Ethical consideration
	  ▪ Patient Teaching Guidelines
	  • Faculty online resources:
	  ▪ e-book to create assignments and track student performance
	  ▪ Classroom and lecture planning resources
	  ▪ Online learning activities and assignment resources
	  ▪ Testing resources
	  • Faculty can adapt online formative assessments to meet the learning needs of the class. Faculty create a class and manage textbook chapter assessments through assignments created within the class and faculty can view student scores upon completion of the questions
	
	• Evolve through Elsevier publishers
	  • Student online resources:
	  ▪ Computer assisted instruction tutorials for select topics
	  ▪ Online bibliography and suggested readings that are chapter-based
	  ▪ Interactive learning activities and animations for select topics

ATTACHMENT A: COVID Contingency Resources
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	• Faculty online resources:
	  ▪ Chapter-based open book quizzes
	  ▪ Lesson plans adapted for online theory
	
	• Assessment Technologies Institute (ATI) – Comprehensive Assessment and Review Program (CARP)
	  • Content Mastery Series Exams
	  • Nursing Logic
	  • Learning Systems
	  • Critical Thinking
	  • Comprehensive Predictor Assessments
	  • Pharmacology and Dosage Calculation tutorials
	
	• Assessment Technologies Institute (ATI) – Virtual ATI (VATI) NCLEX-PN Review
	  • Students engage in Virtual ATI during their last term which is delivered as an individualized, self-paced module to identify learning gaps and reinforce knowledge in preparation for the NCLEX-PN licensing exam. Each student is assigned a Master's or Doctoral prepared virtual teacher to coach the student in the VATI program progression.
	
	• Elsevier Adaptive Quizzing (EAQs) through Elsevier Evolve publishers
	  • A formative assessment tool that provides personalized questions to help students study more effectively through individualized assessment with NCLEX-PN exam-style questions
	  • Interactive adaptive quizzing are created by faculty for textbook chapter assessments
	  • Faculty can select "study mode" to give instant feedback on questions to students
	  • Faculty can select "exam mode" to allow students to review questions at the end of the assignment
	  • Faculty can select quiz assignments to be graded or not graded for formative/summative assessment

ATTACHMENT A: COVID Contingency Resources
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	• Faculty select level of questions to build quiz assignments with advancing level of difficulty, beginning at level 1, progressing to level 2, and level 3 for mastery of questions. • At each level, the program continues to test item until student demonstrates achievement of learning

5. Web-Based Resources for Clinical Experience	• Assessment Technologies Institute (ATI) Skills Videos
	  • Students take module *Pre-Test* for knowledge assessment
	  • Student watch module-specific overview video and review module learning objectives
	  • Students complete all sections of module *Lesson*:
	  ▪ Terminology/Enunciator
	  ▪ Accepted Practices for equipment and skills procedure
	  ▪ Step-by-step video of the skills procedures
	  ▪ Evidence-based research studies related to the specific skills
	  ▪ Practice Challenges: case study and questions
	  ▪ Frequently asked questions related to the specific skills
	  ▪ Documentation and example nurse's notes
	  • Students take module Post-Test and are required to achieve a specific cut score
	
	• Davis Plus Interactive Clinical Scenarios through FA Davis publishers
	  • Online virtual simulation program that guides students in real-life patient scenarios
	  • Case study is presented in patient overview
	  • Student engages in data collection and data reporting
	  • Laboratory and diagnostic tests review
	  • Cases present clustered data for clinical decision-making skills
	  • Includes an electronic patient chart for students to document nursing outcomes, nursing interventions, and evaluation of outcomes
	  • Provides students with a progress indicator; upon completion students view grades and results are emailed to faculty for formative assessment.

ATTACHMENT A: COVID Contingency Resources
Revised 4/17/2020 – revisions are highlighted in blue font

	• Virtual Clinical Excursions (VCE) through Elsevier Evolve publishers
	  • Online virtual simulation program that guides students through a virtual hospital where patients are real with constantly changing conditions
	  • Students collect information, make decisions, and set priorities
	  • Students engage in critically thinking about safe medication administration practices
	  • Students review the patient electronic medical records (EMR) for physician's orders, laboratory reports, patient education, admission history, and other components of the chart.
	  • Students track and trend patient data over time in the electronic medical record to make sound clinical judgments.
	  • Drug Guide includes current drug monographs
	  • Laboratory Guide offers normal value ranges within the virtual environment
	
	• SimChart for Nursing through Elsevier Evolve
	  • Web-based electronic health record (EHR)
	  • Loaded with pre-built unfolding case studies
	  • Integrated with clinical decision support tools
	  • Provides evaluation and reporting tools for faculty to grade students' documentation and generate reports

6. Ongoing Support for Faculty and Students	• Ongoing individualized and/or group faculty support available from Education Technology Staff and Corporate Education Team via Skype conference calls • Development and revision of Policy & Procedures as guidance, questions, and issues arise – COVID 19 Education Guidelines • Faculty available on Canvas through BigBlueButton to communicate and provide individualized student support as needed. • Daily outreach to Directors of Nursing and Assistant Directors of Nursing to discuss any issues that arise unexpectedly. • Daily review of student attendance and faculty outreach • Daily individualized campus virtual meetings for administrative, faculty, and student support.

ATTACHMENT A: COVID Contingency Resources
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ATTACHMENT B: Curriculum Fact Sheet PN – Revised 5/7/2020

LPN101D Practical Nursing

New Britain and Shelton, CT
Diploma Program
CIP Code: 51.3901 - SOC Code: 29-2061

Total Instructional Hours: 1591

Total Credit Hours: 61.0

Program Length: **Day** – Approximately **52** weeks
Eve – Approximately **92** weeks

***The listing of credit hours is not meant to imply that credits can be transferred into college or other private career school programs. Transfer credits are at the sole discretion of the receiving school.**

Program Objective:

The Practical Nursing program prepares the individuals to become entry-level Practical Nurses. Practical Nurses provide nursing to clients of all ages with common health problems in a variety of health care settings under the direction of a Registered Nurse; participate in the nursing process to promote, maintain, and restore health or administer care to dying patients; practice within the legal and ethical framework of the nursing profession; and function as a member of the health care team in a variety of health care environments. Graduates of this program are eligible to sit for the State of Connecticut, Practical Nursing Licensing exam. The classrooms and labs are equipped with the necessary medical equipment and materials essential for training Practical Nurses. Major equipment includes Anatomical Manikins, VitalSim, Wheelchair, Stethoscopes, Electronic Thermometers, Personal Computers and pumps.

Students will be required to complete out-of-class assignments in each course in this program.

Semester	Course No.	Course Title	Lecture Hours	Lab Hours	Clinical Hours	Total Instructional Hours	Total Credit Hours
		CORE COURSES					
I	PN103A	Nursing I - Fundamentals of Nursing	116	40	0	156	**6.5**
I – TBD**	PN105A	Clinical Experience/Nursing I	0	0	180	180	**6.5**
II	PN115A*	Nursing II - Advanced Fundamentals of Nursing	30	30	0	60	**2.5**
II – TBD**	PN117A*	Clinical Experience/Geriatrics	0	0	185	185	**6.5**
II – TBD**	PN124A*	Clinical Experience/Well Child	0	0	27	27	**0.5**
III	PN130A*	Nursing IV - Mental Health Nursing	45	0	0	45	**2.0**
III	PN131A*	Nursing III – Concepts of Maternal-Child	45	3	0	48	**2.0**
III	PN132A*	Nursing V – Nursing Across the Lifespan I	81	10	0	91	**4.0**
III – TBD**	PN134A*	Clinical Experience/ Sub Acute I	0	0	216	216	**7.5**
IV	PN136A*	Clinical Experience/Mental Health	0	0	18	18	**0.5**
IV	PN138A*	Clinical Experience/ Maternal-Child	0	0	18	18	**0.5**
IV	PN140A*	Nursing VI – Nursing Across the Lifespan II	143	11	0	154	**7.0**
IV	PN142A*	Clinical Experience/Sub Acute II	0	0	162	162	**5.5**
		CORE TOTALS	**460**	**94**	**806**	**1360**	**51.5**

Semester	Course No.	Course Title	Lecture Hours	Lab Hours	Clinical Hours	Total Instructional Hours	Total Credit Hours
		FOUNDATION COURSES					
II	PN122A*	Principles of Pharmacology	35	10	0	45	**2.0**
IV	PN144A*	Professional Development	36	0	0	36	**1.5**
		FOUNDATION TOTALS	**71**	**10**	**0**	**81**	**3.5**
		GEN ED COURSES					
I	PN109A	Anatomy and Physiology I	70	0	0	70	**3.0**
II	PN121A*	Anatomy and Physiology II	50	0	0	50	**2.0**
II	PN125A*	Human Growth and Development	30	0	0	30	**1.0**
		GEN ED TOTALS	**150**	**0**	**0**	**150**	**6.0**
		PROGRAM TOTALS	**681**	**104**	**806**	**1591**	**61.0**

* indicates prerequisite requirement

**To Be Determined (TBD) - As a temporary measure during the COVID-19 pandemic healthcare crisis, clinical courses will not take place and will not be required as prerequisites for theory courses until such time that clinical practicums may safely resume in the affiliating healthcare agencies.

PN103A Nursing I - Fundamentals of Nursing: 116 lecture/40 lab/156 total hours / **6.5** credit hours

Catalogue/Course Description: Fundamentals of Nursing is designed to provide the student with the nursing skills, techniques, attitudes and behaviors, which are necessary for the provision of safe, effective, ethical and efficient nursing care. In order to acquire the knowledge and critical thinking skills necessary, the student will be provided with study skills and strategies to maximize their learning potential. Due to the advent of the computerized medical record, the student will also learn computer skills applied to the nursing field and nursing education. By tracing the evolution of nursing, with particular emphases placed on Practical Nursing, the student will learn how to assist each individual patient to return to an optimum level of functioning on the wellness/illness continuum. The student will be afforded the opportunity to apply knowledge gained in a logical and systematic manner. Basic mathematical concepts are reviewed using self-tutorial assignment(s). Simple conversions among systems of measurement will also be integrated into classroom theory, laboratory and clinical practice.

Prerequisites: None

COURSE DEFERRED

PN105A Clinical Experience/Nursing I: 180 clinical hours/180 total hours / **6.5** credit hours

Catalogue/Course Description: This Clinical Experience is a component of Nursing I. Clinical competencies must be successfully completed to receive a passing grade. The student is provided the opportunity to care for clients in a long-term care setting.

Prerequisites: Successfully attain competence in designated lab skills prior to practicing skills in the clinical area.

PN109A Anatomy and Physiology I: 70 lecture/0 lab/70 total hours / **3.0** credit hours

Catalogue/Course Description: This course begins with a focus on basic medical terminology and includes a brief review of the basic components of speech and writing. In this section of the course, emphasis is placed on interpreting and comprehending the specialized vocabulary of the health care field. In addition, this course encompasses aspects of anatomy, physiology, chemistry and microbiology. It will relate to how the parts of the body influence each other and contribute to effective overall functioning in maintaining homeostasis.

Prerequisites: None

PN115A Nursing II - Advanced Fundamentals of Nursing: 30 lecture/30 lab/60 total hours / **2.5** credit hours

Catalogue/Course Description: This course is designed to expand on the knowledge base acquired in Nursing I – Fundamentals of Nursing. The emphasis will be on increasingly complex nursing procedures and techniques. Critical Thinking Skills and the Nursing Process will be utilized by the student to assist the client to obtain an optimum level of functioning on the Wellness/Illness continuum.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I

COURSE DEFERRED

PN117A Clinical Experience/Geriatrics: 185 clinical hours /185 total hours / **6.5** credit hours

Catalogue/Course Description: This Clinical Experience is a component of Human Growth and Development. Clinical competencies must be successfully completed to receive a passing grade for this course.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, PN105A Clinical Experience/Nursing I, PN109A Anatomy and Physiology I

PN121A Anatomy and Physiology II: 50 lecture/0 lab/50 total hours / **2.0** credit hours

Catalogue/Course Description: This course is a continuation of Anatomy and Physiology I. The primary focus encompasses anatomy and physiology of the remaining systems and nutrition. This course also relates how the parts of the body influence each other and contribute to effective overall functioning in maintaining homeostasis.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I

PN122A Principles of Pharmacology: 35 lecture/10 lab/45 total hours/ 2.0 credit hours

Catalogue/Course Description: This course provides an introduction to various medication classification systems, and numerous medications' effect on the human organism. This course also includes a comprehensive review of mathematical functions as they relate to dosage calculations. The student will be required to take a Dosage Calculations exam. This course also includes medication administration and requires the student to demonstrate competence in medication administration skills in the laboratory

setting. Principles of Pharmacology acquaints the student with the basic classification systems for medications as well as the general action, use, side effects and nursing implications common to each classification system.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I

COURSE DEFERRED

PN124A Clinical Experience/Well Child: 27 clinical hours/27 total hours / 0.5 credit hours

Catalogue/Course Description: This Clinical Experience is a component of Human Growth and Development. Clinical competencies must be successfully completed to receive a passing grade for this course. The student will have the opportunity to observe/interact with the well-child in the pre-school setting.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, PN105A Clinical Experience/Nursing I, PN109A Anatomy and Physiology I

PN125A Human Growth and Development: 30 lecture/0 lab/30 total hours / **1.0** credit hours

Catalogue/Course Description: This course provides an overview of the biological, social and psychosocial processes that contribute to human growth and development across the lifespan. Areas covered include theories of development, learning and personality. Also included will be concepts of sociology, culture, status, role and identity. Areas of care for the older adult include physical and psychosocial changes, strengths and limitations which occur as part of the aging process. The role of the nurse in preventative and restorative care throughout the life span is emphasized.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I

PN130A Nursing IV – Mental Health Nursing: 45 lecture/0 lab/45 total hours / **2.0** credit hours

Catalogue/Course Description: This course is designed to provide the student with an understanding of care for the client with Mental Health needs throughout the life span. This course will focus on current theories, treatment modalities, pharmacology and therapeutic communication. Emphasis will be placed on developing an understanding of the manifestations of a variety of mental health disorders. The nursing process will be utilized to respond to various ethical, legal, emotional and behavioral issues.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, ~~PN117A Clinical Experience / Geriatrics,~~ PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development

PN131A Nursing III– Concepts of Maternal-Child: 45 lecture/3 lab/48 total hours / **2.0** credit hours

Catalogue/Course Description: This course covers the physical and emotional aspects of pregnancy, labor, delivery and postpartum care. Emphasis is placed on health promotion, and prevention of complications for the mother, fetus and newborn infant and changes related to the family unit. Health problems that complicate pregnancy are discussed including those related to the mother and the infant. Pharmacology

pertaining to Maternal Child Health is also discussed. The nursing process is applied to provide effective client care. Strong emphasis is placed on the nurse's role as teacher in health promotion.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, ~~PN117A Clinical Experience / Geriatrics,~~ PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development

PN132A Nursing V - Nursing Across the Lifespan I: 81 lecture/10 lab/91 total hours / **4.0** credit hours

Catalogue/Course Description: The systems approach to this course is designed to provide the student with a broad base of knowledge of selected diseases and disorders which effect individuals as they move along the wellness/illness continuum. Emphasis will be placed on using the nursing process to meet the unique needs of each patient and family and/or support system during disruptions of health with the goal of returning the individual to an optimal level of wellness or to support them through the experience of death. Included will be basic pathophysiology within selected biological system disorders: Cardiovascular, Respiratory, Endocrine, and Upper Gastrointestinal. Fluid, Electrolytes and Shock will also be covered. Emphasis will also be placed on appropriate methods of health maintenance where applicable, diet therapy, and the use of medications for the restoration and maintenance of health.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, ~~PN117A Clinical Experience / Geriatrics,~~ PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development

COURSE DEFERRED

PN134A Clinical Experience / Sub Acute I: 216 clinical hours/ 216 total hours / **7.5** credit hours

Catalogue/Course Description: This Clinical Experience is a component of Nursing V – Nursing Across the Lifespan I. Clinical competencies must be successfully completed to receive a passing grade for this course. Depending on scheduling, the student's participation in the medication administration competencies may occur in this course. This Clinical experience will provide the student with the opportunity to care for clients in a sub-acute clinical environment.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, PN105A Clinical Experience/Nursing I, PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, PN117A Clinical Experience / Geriatrics, PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development

PN136A Clinical Experience / Mental Health: 18 clinical hours/ 18 total hours / **0.5** credit hours

Catalogue/Course Description: This clinical experience is a component of Nursing IV – Mental Health Nursing. Clinical competencies must be successfully completed to receive a passing grade for this course. Clinical experiences will provide the student with the opportunity to utilize therapeutic communication skills while interacting with adults within the mental health setting including an inpatient psychiatric unit.

As approved by the Connecticut Board of Examiners for Nursing, students who have completed in excess of 85% of total onsite clinical will participate in virtual clinical experiences in order to meet clinical course requirements.

This virtual clinical experience is a component of Nursing IV – Mental Health Nursing. Clinical competencies must be successfully completed to receive a passing grade for this course. Virtual clinical experiences will use web-based resources to provide the student with the opportunity to demonstrate therapeutic communication skills while learning about the clinical presentation of the client with mental health disorders.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, PN105A Clinical Experience/Nursing I, PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, PN117A Clinical Experience / Geriatrics,—PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development, PN130A Nursing IV - Mental Health Nursing, PN131A Nursing III - Concepts of Maternal Child, PN132A Nursing V - Nursing Across the Lifespan I, PN134A Clinical Experience / Sub Acute I

PN138A Clinical Experience / Maternal-Child: 18 clinical hours/ 18 total hours / **0.5** credit hours

Catalogue/Course Description: This Clinical Experience is a component of Nursing III – Concepts of Maternal Child. Clinical competencies must be successfully completed to receive a passing grade for this course. The student will have the opportunity to observe / interact with clients in a maternity setting.

As approved by the Connecticut Board of Examiners for Nursing, students who have completed in excess of 85% of total onsite clinical will participate in virtual clinical experiences in order to meet clinical course requirements.

This virtual clinical experience is a component of Nursing III – Concepts of Maternal Child. Clinical competencies must be successfully completed to receive a passing grade for this course. Virtual clinical experiences will use web-based resources to provide the student with the opportunity to demonstrate nursing care of the family unit during pregnancy, delivery, and the postpartum period, including nursing care of the newborn.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, PN105A Clinical Experience/Nursing I, PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, PN117A Clinical Experience / Geriatrics, PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development, PN130A Nursing IV - Mental Health Nursing, PN131A Nursing III - Concepts of Maternal Child, PN132A Nursing V - Nursing Across the Lifespan I, PN134A Clinical Experience / Sub Acute I

PN140A Nursing VIA – Nursing Across the Lifespan II: 143 lecture/ 11 lab/154 total hours / **7.0** credit hours

Catalogue/Course Description: This course is a continuation of Nursing V – Nursing Across the Lifespan I. The systems approach continues with this course and is designed to provide the student with a broad knowledge base of selected diseases and disorders affecting individuals of all ages as they move along the wellness/illness continuum. Emphasis will be placed on using the nursing process to meet the unique needs of each patient and family and/or support systems during disruption of health with the goal of returning the individual to an optimal level of wellness or to support them through the experience of death. Included will be a unit on the ill-child and basic pathophysiology within selected biological systems' disorders: Lower Gastrointestinal, Neurological, Integumentary, Genitourinary Reproductive, Sensory, Cancer, Hematopoietic, and Musculoskeletal. Infectious diseases will also be covered. Emphasis will also be placed on the appropriate methods of health maintenance and where applicable, diet therapy and the use of medications for the restoration of health.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, ~~PN117A Clinical Experience / Geriatrics,~~ PN121A Anatomy and Physiology II, PN122A Principles of

Pharmacology, PN125A Human Growth and Development, PN130A Nursing IV - Mental Health Nursing, PN131A Nursing III - Concepts of Maternal Child, PN132A Nursing V - Nursing Across the Lifespan I, ~~PN134A Clinical Experience / Sub Acute I~~

PN142A Clinical Experience / Sub Acute II: 162 clinical hours/ 162 total hours / **5.5** credit hours

Catalogue/Course Description: This Clinical Experience is a component of Nursing VI – Nursing Across Lifespan II. Clinical competencies must be successfully completed to receive a passing grade for this course. Depending on scheduling, the student's participation in the medication administration competencies may occur in this course. This Clinical experience will provide the student with the opportunity to care for clients of all ages in a sub-acute clinical environment.

As approved by the Connecticut Board of Examiners for Nursing, students who have completed in excess of 85% of total onsite clinical will participate in virtual clinical experiences in order to meet clinical course requirements.

This virtual clinical experience is a component of Nursing IV – Nursing Across the Lifespan II. Clinical competencies must be successfully completed to receive a passing grade for this course. Virtual clinical experiences will use web-based resources to provide the student with the opportunity to demonstrate the nursing care of clients in sub-acute settings across the lifespan. Medication administration competency will be assessed using simulation and the SimChart® Electronic Health Record.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, PN105A Clinical Experience/Nursing I, PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, PN117A Clinical Experience / Geriatrics,—PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development, PN130A Nursing IV - Mental Health Nursing, PN131A Nursing III - Concepts of Maternal Child, PN132A Nursing V - Nursing Across the Lifespan I, PN134 A Clinical Experience / Sub Acute I

PN144A Professional Development: 36 lecture/ 0 lab/36 total hours / **1.5** credit hours

Catalogue/Course Description: This course is designed to prepare the student for the role transition to Licensed Practical Nurse. Emphasis will be placed on preparation for the NCLEX-PN including review of content material in conjunction with test-taking skills and practice tests. Professional topics include the responsibility of licensure, the necessity of continuing education and the involvement in nursing organizations. State Board of Examiners for Nursing White Papers, various letters, Practical Nursing's Standards of Nursing Practice will also be discussed. A session on Disaster Nursing and the Licensed Practical Nurse's role along with Bioterrorism issues will be in included. In order to pass this course, a passing grade must be achieved on the Exit Exam.

Prerequisites: PN103A Nursing I - Fundamentals of Nursing, ~~PN105A Clinical Experience/Nursing I,~~ PN109A Anatomy and Physiology I, PN115A Nursing II - Advanced Fundamentals of Nursing, ~~PN117A Clinical Experience / Geriatrics,~~ PN121A Anatomy and Physiology II, PN122A Principles of Pharmacology, PN125A Human Growth and Development, PN130A Nursing IV - Mental Health Nursing, PN131A Nursing III - Concepts of Maternal Child, PN132A Nursing V - Nursing Across the Lifespan I, ~~PN134A Clinical Experience / Sub Acute I~~

Maximum Time Frame (MTF) 91.5 semester credits

ATTACHMENT C

Syllabus

PN136A Clinical Experience/Mental Health

Instructor Information

Name: _____

Phone Number: _____

Email: _____

Office Hours: _____

INSTRUCTOR

To be announced upon onset of program.

COURSE DESCRIPTION

This clinical experience is a component of Nursing IV – Mental Health Nursing. Clinical competencies must be successfully completed to receive a passing grade for this course. Clinical experiences will provide the student with the opportunity to utilize therapeutic communication skills while interacting with adults within the mental health setting including an inpatient psychiatric unit.

As approved by the Connecticut Board of Examiners for Nursing, students who have completed in excess of 85% of total onsite clinical will participate in virtual clinical experiences in order to meet clinical course requirements.

This virtual clinical experience is a component of Nursing IV – Mental Health Nursing. Clinical competencies must be successfully completed to receive a passing grade for this course. Virtual clinical experiences will use web-based resources to provide the student with the opportunity to demonstrate therapeutic communication skills while learning about the clinical presentation of the client with mental health disorders.

CLINICAL OBJECTIVES

Upon completion of this course the student will:

1. Demonstrate the ability to function safely and effectively in a psychiatric setting.
2. Examine and recognize the characteristics and coping mechanisms of clients with psychological/psychosocial disorders.
3. Demonstrate effective therapeutic communication with the client(s), families/significant others and members of the healthcare team.
4. Utilize the nursing process to support goal-oriented care for the client.
5. Evaluate the therapeutic effectiveness of psychotropic drugs used in the psychiatric mileu.
6. Examine the legal, ethical, spiritual and cultural aspects that influence the mentally impaired individual and the nurse's responsibilities in providing care.
7. Demonstrate effective use of the DSM V.
8. Identify therapy modalities used in the treatment of psychiatric disorders.
9. Explain the role of the nursing and multidisciplinary teams in planning the care and treatment of the client in the psychiatric setting.

PREREQUISITE(S)

PN103A Nursing I – Fundamentals of Nursing, **PN109A** Anatomy & Physiology I, **PN115A** Nursing II – Advanced Fundamentals of Nursing, **PN121A** Anatomy & Physiology II, **PN122A** Principles of Pharmacology, **PN125A** Human Growth and Development, **PN130A** Nursing IV/Mental Health, **PN131A** Nursing III/Concepts of Maternal-Child, **PN132A** Nursing V/Nursing Across the Lifespan I

Note: The following clinical courses are deferred during the COVID crisis

PN105A Clinical Experience/Nursing I

PN117A Clinic Experience/Geriatrics

PN124A Clinical Experience/Well Child

PN134A Clinical Experience/Sub Acute I

CONTACT HOURS

18 Total Hours (18 Clinical Hours)

CREDIT HOURS

0.5 Credit Hours

INSTRUCTIONAL MATERIALS AND REFERENCES

DeWit, S. C. (2017). *Fundamental Concepts and Skills for Nursing with EAQ. 5th Edition.* Saunders Publication, Inc. Flesch-Kincaid Grade Reading Level: 10.0

Elsevier. (2018). *HESI Comprehensive Review for the NCLEX-PN® Examination, 6th Edition,* Elsevier. Flesch-Kincaid Grade Reading Level: N/A

Gorman, L & Anwar, R. (2019). *Neeb's Fundamentals of Mental Health Nursing, 5th edition.* FA Davis. Flesch-Kincaid Reading Grade Level: 12.4

Independent Editors. (2017/2019). *Taber's 23rd Edition with Davis Drug Guide. 16th edition.* FA Davis. Flesch-Kincaid Grade Reading Level: N/A

Ladwig, G. B., Ackley, B. J. (2019). *Mosby's Guide to Nursing Diagnosis, 6th edition* Mosby. Flesch-Kincaid Grade Reading Level: N/A

Mosby. (2017) *Mosby's PDQ for the LPN, 5th Edition.* Mosby. Flesch-Kincaid Grade Reading Level: N/A

Ogden, S. J. (2020). *Calculations of Drug Dosages: An Interactive Workbook, 11th Edition.* Mosby. Flesch-Kincaid Grade Reading Level: 11.0

Pagana, K. (2019). *Mosby's Diagnostic and Laboratory Tests, 14th edition.* Elsevier. Flesch-Kincaid Grade Reading Level: N/A

Silvestri, L. A. (2018). *Saunders Comprehensive Review for the NCLEX-PN® Examination with EAQ 7th Edition.* Saunders. Flesch-Kincaid Grade Reading Level: N/A

Williams, L.S., Hopper, P.D. (2019). *Understanding Medical-Surgical Nursing with Davis Plus, 6th Edition.* F.A. Davis. Flesch-Kincaid Grade Reading Level: 10.8

Workman, I; LaCharity, L.; Kruchko, S. (2016). *Understanding Pharmacology: Essentials for Medication Safety, 2nd edition (Text and Study Guide).* Saunders. Flesch-Kincaid Grade Reading Level:11.0

SUPPLEMENTAL RESOURCES

Assessment Technologies Institute. (2017) *Nutrition for Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute. (2017). *PN Pharmacology for Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute, (2017). *PN Mental Health Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute. (2017). *PN Adult Medical Surgical Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute, (2017). *Fundamentals for Nursing.* Flesch-Kincaid Grade Reading Level: N/A

COURSEWARE REQUIRED

Assessment Technologies Institute (ATI)
Electronic Medical Record –SimChart® access code provided to student
Career Edge
Elsevier Adaptive Quizzing
Davis Edge/Davis Plus

INSTRUCTIONAL METHODS

Virtual training by a registered nurse. Selected assignments, pre and post conference and utilization of multi-media materials will be included.

A variety of teaching and learning strategies will be used throughout this course. These may include, but are not limited to Canvas conferences, virtual discussions, simulations, discussion threads, case studies, nursing care planning and virtual demonstrations. The use of multimedia such as audio visual aids and internet sites may be inserted as appropriate during each teaching-learning activity.

Distance learning web-based resources such as EBSCO/CINAHL and ProQuest databases are utilized. Additional web-based resources include Davis Plus/Davis Edge, Elsevier Adaptive Quizzing, SimChart® Electronic Health Record, Assessment Technologies Institute (ATI) Comprehensive Assessment and Review Program. All classes are delivered using the Canvas Learning Management System (LMS). All course assessments are administered using the Respondus Lockdown Browser with monitor. All ATI assessments are delivered using the Proctorio Remote Proctor.

ASSESSMENT CRITERIA & METHOD OF EVALUATING STUDENTS

Criteria for Final Grade: Clinical competencies must be successfully completed. The student must complete all scheduled assignments designated by the clinical nursing instructor.

Out-of-Class Assignments

Out-of-Class Assignments are an extension of the clinical experience and provide an opportunity for students to research, apply, or practice concepts learned in the classroom. This type of reinforcement strengthens a student's understanding of course competencies. While the type of assignments and time require will vary from course to course and student to student, each student will be required to complete out-of-class assignments which will be included as part of the course final evaluation.

Professionalism

Students are expected to come each week prepared to contribute their knowledge and insights. We will all learn from each other. Students are expected to act in a professional manner, meeting deadlines, solving problems, cooperating with classmates and generally contributing in a positive way to the clinical experience. Working in the real world often means searching for solutions in a group context. Teamwork, listening, empathy, enthusiasm, emotional maturity and consideration of other people's concerns are essential to success. Please bring these qualities and values with you to clinical. It is as important to 'practice' these interpersonal skills as it is to learn new intellectual content. Students will be evaluated on their professional demeanor in the clinical environment.

GRADING

Clinical Requirements:

1. **Assignments**: Client Activity Tool(s) (CATs), Case Studies, Process Recordings, SimChart® Electronic Health Record assignments, nursing care plans, journal entries, medication cards, and other projects as assigned.

2. **Student Participation**: Students must participate in clinical. Students will accept virtual client assignments and seek assistance from the nursing instructor when needed. Students are expected to take full advantage of all learning opportunities.

3. **Safety**: Student shall follow all aspects of safety by demonstrating knowledge of the National Patient Safety Goals.

4. **Clinical Attendance**: Virtual clinical attendance is required of all students.

   Note: In order to attain competency and meet the clinical objectives, a student must comply with virtual attendance regulations.

Grading Policy

Please refer to the campus catalog, and corresponding addendum, for the most current grading policy and grade scale.

A student earning a cut score of 75 or above is considered to have successfully completed the course and is eligible to pursue further studies. A student receiving a score of 74 or below has not successfully completed a course. A course that is not successfully completed must be repeated and the cut score of 75 achieved to meet graduation requirements.

REQUIREMENTS FOR SUCCESSFUL COMPLETION OF THE COURSE - CLINICAL

At a minimum, students must achieve the following: a cut score of 75 or above, completion of all required assignments, participation in virtual care and clinical skills, projects, and adherence to the school attendance policy. It is the students' responsibility to seek the instructor's guidance at the time when a problem area is initially encountered, not after receiving an unsatisfactory grade.

A student whose performance does not meet the standard in one skill area does not successfully complete this course. All Students MUST perform at standard in all skill areas in order to successfully complete this course.

TOPICAL OUTLINE

Course Outline: Refer to the clinical competencies for complete information.

STUDENT CENTERED LEARNING ACTIVITIES

The following activities and projects selected for this course are targeted to encourage active student participation in class and provoke critical thinking skills required for the workplace. They will be incorporated at the instructor's discretion.

- Synchronous online delivery
- Recorded lectures with 14-day access
- Online assignments including case studies, YouTube video links, internet website links, Podcast audio
- Online Discussion Threads
- Textbook readings or peer-reviewed journal article readings
- Synchronous student-teacher video discussions through Canvas Conferencing

- Simulations, role play
- Group discussion
- Peer mentoring of other students
- Internet research and computer based learning and reporting
- Portfolio Development
- Cooperative Learning Groups
- Think-Pair-Share
- Case Studies

DATE SYLLABUS WAS LAST REVIEWED

April 20, 2020

ATTACHMENT D

Syllabus

PN138A Clinical Experience Maternal-Child

Instructor Information

Name: _____

Phone Number: _____

Email: _____

Office Hours: _____

INSTRUCTOR

To be announced upon onset of program.

COURSE DESCRIPTION

This Clinical Experience is a component of Nursing III – Concepts of Maternal Child. Clinical competencies must be successfully completed to receive a passing grade for this course. The student will have the opportunity to observe / interact with clients in a maternity setting.

As approved by the Connecticut Board of Examiners for Nursing, students who have completed in excess of 85% of total onsite clinical will participate in virtual clinical experiences in order to meet clinical course requirements.

This virtual clinical experience is a component of Nursing III – Concepts of Maternal Child. Clinical competencies must be successfully completed to receive a passing grade for this course. Virtual clinical experiences will use web-based resources to provide the student with the opportunity to demonstrate nursing care of the family unit during pregnancy, delivery, and the postpartum period, including nursing care of the newborn.

CLINICAL OBJECTIVES

Upon completion of this course the student will:

1. Participate in the nursing care of the post-partum client and family/significant others.
2. Develop a plan of care in collaboration with the health care team for the antepartum and post-partum client experiencing a normal or complex pregnancy.
3. Discuss how the labor and delivery experience affects the physiological and psychosocial needs of the post-partum client.
4. Verbalize understanding of the cultural and spiritual needs of the maternity client and family/significant other.
5. Compare and contrast the physical characteristics and nursing interventions of the preterm, term and post term newborn term newborn.
6. Identify teaching needs of the maternity client and family/significant other.
7. Describe and discuss the family after birth including nursing care in the immediate postpartum period, safety of the family unit, postpartum changes in the mother, care of the newborn, breast and bottle feeding and discharge planning.
8. Demonstrate adherence to the Code of Ethics, National Patient Safety Goals, and Standards of Care in providing care to the client.
9. Demonstrate professionalism and effective therapeutic communication in the care of the perinatal client and family unit.

PREREQUISITE(S)

PN103A Nursing I – Fundamentals of Nursing, **PN109A** Anatomy & Physiology I, **PN115A** Nursing II – Advanced Fundamentals of Nursing, **PN121A** Anatomy & Physiology II, **PN122A** Principles of Pharmacology, **PN125A** Human Growth and Development, **PN130A** Nursing IV/Mental Health, **PN131A** Nursing III/Concepts of Maternal-Child, **PN132A** Nursing V/Nursing Across the Lifespan I

Note: The following clinical courses are deferred during the COVID crisis

PN105A Clinical Experience/Nursing I

PN117A Clinic Experience/Geriatrics

PN 124A Clinical Experience/Well Child

PN134A Clinical Experience/Sub Acute I

CONTACT HOURS

18 Total Hours (18 Clinical Hours)

CREDIT HOURS

0.5 Credit Hours / Module IV

INSTRUCTIONAL MATERIALS AND REFERENCES

DeWit, S. C. (2017). *Fundamental Concepts and Skills for Nursing with EAQ. 5th Edition.* Saunders Publication, Inc. Flesch-Kincaid Grade Reading Level: 10.0

Elsevier. (2018*). HESI Comprehensive Review for the NCLEX-PN® Examination, 6th Edition,* Elsevier. Flesch-Kincaid Grade Reading Level: N/A

Independent Editors. (2017/2019). *Taber's 23rd Edition with Davis Drug Guide. 16th edition.* FA Davis. Flesch-Kincaid Grade Reading Level: N/A

Ladwig, G. B., Ackley, B. J. (2019). *Mosby's Guide to Nursing Diagnosis, 6th edition* Mosby. Flesch-Kincaid Grade Reading Level: N/A

Leifer, G. (2019*). Introduction to Maternity & Pediatric Nursing with EAQ and VCE, 8th edition.* Saunders Publication, Inc. Flesch-Kincaid Grade Reading Level: 10.0

Mosby. (2017) *Mosby's PDQ for the LPN, 5th Edition.* Mosby. Flesch-Kincaid Grade Reading Level: N/A

Pagana, K. (2019). *Mosby's Diagnostic and Laboratory Tests, 14th edition.* Elsevier. Flesch-Kincaid Grade Reading Level: N/A

Silvestri, L. A. (2018). *Saunders Comprehensive Review for the NCLEX-PN ® Examination with EAQ 7th Edition.* Saunders. Flesch-Kincaid Grade Reading Level: N/A

Workman, I; LaCharity, L.; Kruchko, S. (2016). *Understanding Pharmacology: Essentials for Medication Safety, 2nd edition (Text and Study Guide).* Saunders. Flesch-Kincaid Grade Reading Level: 11.0

SUPPLEMENTAL RESOURCES

Assessment Technologies Institute. (2017) *Nutrition for Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute. (2017). *PN Pharmacology for Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute, 2017). *Fundamentals for Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute. (2017). *PN Maternal and Newborn Nursing.* Flesch-Kincaid Grade Reading Level: N/A

COURSEWARE REQUIRED

Assessment Technologies Institute (ATI)
Electronic Medical Record – SimChart® access code provided to student
Career Edge
Elsevier Adaptive Quizzing
Virtual Clinical Excursions for Maternity and Pediatric Nursing
Davis Edge/Davis Plus

INSTRUCTIONAL METHODS

Virtual training by a registered nurse. Selected assignments, pre and post conference and utilization of multi-media materials will be included.

A variety of teaching and learning strategies will be used throughout this course. These may include, but are not limited to Canvas conferences, virtual discussions, simulations, discussion threads, case studies, nursing care planning and virtual demonstrations. The use of multimedia such as audio visual aids and internet sites may be inserted as appropriate during each teaching-learning activity.

Distance learning web-based resources such as EBSCO/CINAHL and ProQuest databases are utilized. Additional web-based resources include Davis Plus/Davis Edge, Elsevier Adaptive Quizzing, SimChart® Electronic Health Record, Assessment Technologies Institute (ATI) Comprehensive Assessment and Review Program. All classes are delivered using the Canvas Learning Management System (LMS). All course assessments are administered using the Respondus Lockdown Browser with monitor. All ATI assessments are delivered using the Proctorio Remote Proctor.

ASSESSMENT CRITERIA & METHOD OF EVALUATING STUDENTS

Criteria for Final Grade: Clinical competencies must be successfully completed. The student must complete all scheduled assignments designated by the clinical nursing instructor.

Out-of-Class Assignments

Out-of-Class Assignments are an extension of the clinical experience and provide an opportunity for students to research, apply, or practice concepts learned in the classroom. This type of reinforcement strengthens a student's understanding of course competencies. While the type of assignments and time require will vary from course to course and student to student, each student will be required to complete out-of-class assignments which will be included as part of the course final evaluation.

Professionalism

Students are expected to come each week prepared to contribute their knowledge and insights. We will all learn from each other. Students are expected to act in a professional manner, meeting deadlines, solving problems, cooperating with classmates and generally contributing in a positive way to the clinical experience. Working in the real world often means searching for solutions in a group context. Teamwork, listening, empathy, enthusiasm, emotional maturity and consideration of other people's concerns are essential to success. Please bring these qualities and values with you to clinical. It is as important to 'practice' these interpersonal skills as it is to learn new intellectual content. Students will be evaluated on their professional demeanor in the clinical environment.

GRADING

Clinical Requirements:

1. **Assignments**: Client Activity Tool(s) (CATs), Case Studies, Sim Chart assignments, Virtual Clinical Excursion assignments, nurse care plans, journal entries, medication cards, and other projects as assigned.

2. **Student Participation**: Students must participate in clinical. Students will accept virtual client assignments and seek assistance from the nursing instructor when needed. Students are expected to take full advantage of all learning opportunities.

3. **Safety**: Student shall follow all aspects of safety by demonstrating knowledge of the National Patient Safety Goals.

4. **Clinical Attendance**: Virtual clinical attendance is required of all students.

   Note: In order to attain competency and meet the clinical objectives, a student must comply with virtual attendance regulations.

Grading Policy

Please refer to the campus catalog, and corresponding addendum, for the most current grading policy and grade scale.

A student earning a cut score of 75 or above is considered to have successfully completed the course and is eligible to pursue further studies. A student receiving a score of 74 or below has not successfully completed a course. A course that is not successfully completed must be repeated and the cut score of 75 achieved to meet graduation requirements.

Requirements for Successful Completion of the Course - Clinical

At a minimum, students must complete all required assignments, participate in virtual care and clinical skills, complete projects, and demonstrate adherence to the school attendance policy. It is the students' responsibility to seek the instructor's guidance at the time when a problem area is initially encountered, not after receiving an unsatisfactory grade.

A student whose performance does not meet the standard in one skill area does not successfully complete this course. All Students MUST perform at standard in all skill areas in order to successfully complete this course.

Topical Outline

Course Outline: Refer to the clinical competencies for complete information.

Student Centered Learning Activities

The following activities and projects selected for this course are targeted to encourage active student participation in class and provoke critical thinking skills required for the workplace. They will be incorporated at the instructor's discretion.

- Synchronous online delivery
- Recorded lectures with 14-day access
- Online assignments including case studies, YouTube video links, internet website links, Podcast audio
- Online Discussion Threads
- Textbook readings or peer-reviewed journal article readings
- Synchronous student-teacher video discussions through Canvas Conferencing
- Simulations, role play
- Group discussion
- Peer mentoring of other students
- Internet research and computer based learning and reporting
- Portfolio Development
- Cooperative Learning Groups
- Think-Pair-Share

Date Syllabus was Last Reviewed

April 20, 2020

ATTACHMENT E

Syllabus

PN142A Clinical Experience
Sub Acute II

Instructor Information

Name: _____

Phone Number: _____

Email: _____

Office Hours: _____

INSTRUCTOR

To be announced upon onset of program.

COURSE DESCRIPTION

This Clinical Experience is a component of Nursing VI – Nursing Across Lifespan II. Clinical competencies must be successfully completed to receive a passing grade for this course. Depending on scheduling, the student's participation in the medication administration competencies may occur in this course. This Clinical experience will provide the student with the opportunity to care for clients of all ages in a sub-acute clinical environment.

As approved by the Connecticut Board of Examiners for Nursing, students who have completed in excess of 85% of total onsite clinical will participate in virtual clinical experiences in order to meet clinical course requirements.

This virtual clinical experience is a component of Nursing IV – Nursing Across the Lifespan II. Clinical competencies must be successfully completed to receive a passing grade for this course. Virtual clinical experiences will use web-based resources to provide the student with the opportunity to demonstrate the nursing care of clients in sub-acute settings across the lifespan. Medication administration competency will be assessed using simulation and the SimChart® Electronic Health Record.

CLINICAL OBJECTIVES

Upon completion of this course the student will:

1. Demonstrate proficiency in gathering data and anticipate the bio- psychosocial, cultural and spiritual needs of clients in a variety of settings.
2. Provide competent and compassionate patient-centered care analyzing the client's spiritual and cultural needs.
3. Contribute to the development, revision, implementation and evaluation of the plan of care for assigned clients.
4. Incorporate progressive learning and theoretical concepts into daily practice, and perform clinical skills from simple to complex, including safe medication administration, in an autonomous and competent manner, at a level necessary to transition to graduate practical nurse.
5. Evaluate the quality of patient-centered care provided to assure practice is evidence-based.
6. Identify the need for and participate in health teaching for the client, family and or significant other.
7. Demonstrate adherence to the Code of Ethics, National Patient Safety Goals, and Standards of Care in providing care to the client.
8. Function as a member of the health care team in a variety of health care settings to prepare the student to transition into the role of graduate practical nurse.
9. Demonstrate professionalism, effective therapeutic communication, strong time management skills, priority setting and leadership/delegation skills.

PREREQUISITE(S)

PN103A Nursing I - Fundamentals of Nursing, **PN109A** Anatomy and Physiology I, **PN115A** Nursing II - Advanced Fundamentals of Nursing, **PN121A** Anatomy and Physiology II, **PN122A** Principles of Pharmacology, **PN125A** Human Growth and Development, **PN130A** Nursing IV – Mental Health, Nursing, **PN131A** Nursing III – Concepts of Maternal-Child, **PN132A** Nursing V – Nursing Across the Lifespan I

Note: The following clinical courses are deferred during the COVID crisis

PN105A Clinical Experience/Nursing I

PN117A Clinic Experience/Geriatrics

PN 124A Clinical Experience/Well Child

PN134A Clinical Experience/Sub Acute I

CONTACT HOURS

162 Total Hours (162 Clinical Hours)

CREDIT HOURS

5.5 Credit Hours

INSTRUCTIONAL MATERIALS AND REFERENCES

DeWit, S. C. (2017). *Fundamental Concepts and Skills for Nursing with EAQ. 5th Edition.* Saunders Publication, Inc. Flesch-Kincaid Grade Reading Level: 10.0

Elsevier. (2018*). HESI Comprehensive Review for the NCLEX-PN® Examination, 6th Edition,* Elsevier. Flesch-Kincaid Grade Reading Level: N/A

Independent Editors. (2017/2019). *Taber's 23rd Edition with Davis Drug Guide. 16th edition.* FA Davis. Flesch-Kincaid Grade Reading Level: N/A

Ladwig, G. B., Ackley, B. J. (2019). *Mosby's Guide to Nursing Diagnosis, 6th edition* Mosby. Flesch-Kincaid Grade Reading Level: N/A

Mosby. (2017). *Mosby's PDQ for the LPN, 5th Edition.* Mosby. Flesch-Kincaid Grade Reading Level N/A

Ogden, S. J. (2020). *Calculations of Drug Dosages: An Interactive Workbook, 11th Edition.* Mosby. Flesch-Kincaid Grade Reading Level: 11.0

Pagana, K. (2019). *Mosby's Diagnostic and Laboratory Tests, 14th edition.* Elsevier. Flesch-Kincaid Grade Reading Level: N/A

Silvestri, L. A. (2018). *Saunders Comprehensive Review for the NCLEX-PN ® Examination with EAQ 7th Edition.* Saunders. Flesch-Kincaid Grade Reading Level: N/A

Workman, I; LaCharity, L.; Kruchko, S. (2016). *Understanding Pharmacology: Essentials for Medication Safety, 2nd edition (Text and Study Guide).* Saunders. Flesch-Kincaid Grade Reading Level 11.0

Williams, L.S., Hopper, P. D. (2019). Understanding Medical-Surgical Nursing with Davis Plus, 6th Edition. F.A. Davis; Flesch-Kincaid Grade Reading Level R: 10.8

SUPPLEMENTAL RESOURCES

Assessment Technologies Institute. (2017) *Nutrition for Nursing.* Flesch-Kincaid Grade Reading Level: N/A

Assessment Technologies Institute. (2017). *PN Pharmacology for Nursing.* Flesch-Kincaid Grade Reading Level: N/A

Assessment Technologies Institute, (2017). *Fundamentals for Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute. (2017). PN *Adult Medical Surgical Nursing.* Flesch-Kincaid Grade Reading Level: N/A
Assessment Technologies Institute. (2017*). Nursing Leadership and Management.* Flesch-Kincaid Grade Reading Level: N/A

COURSEWARE REQUIRED

Assessment Technologies Institute (ATI)

Electronic Medical Record – SimChart® access code provided to student
Career Edge
Elsevier Adaptive Quizzing
Davis Edge/Davis Plus
Virtual Clinical Excursions

INSTRUCTIONAL METHODS

Virtual training by a registered nurse. Selected assignments, pre and post conference and utilization of multi-media materials will be included.

A variety of teaching strategies will be used throughout this course. These may include, but are not limited to Canvas conference lectures, virtual classroom discussions, simulations, discussion threads, case studies, virtual classroom/laboratory exercises, virtual demonstrations, and remote content assessments. The use of multimedia such as audio visual aids and internet sites may be inserted as appropriate during each teaching-learning activity.

Distance learning web-based resources such as EBSCO/CINAHL and ProQuest databases are utilized. Additional web-based resources include Davis Plus/Davis Edge, Elsevier Adaptive Quizzing, SimChart® Electronic Health Record, Assessment Technologies Institute (ATI) Comprehensive Assessment and Review Program. All classes are delivered using the Canvas Learning Management System (LMS). All course assessments are administered using the Respondus Lockdown Browser with monitor. All ATI assessments are delivered using the Proctorio Remote Proctor.

ASSESSMENT CRITERIA & METHOD OF EVALUATING STUDENTS

Criteria for Final Grade: Clinical competencies must be successfully completed. The student must complete all scheduled assignments designated by the clinical nursing instructor.

Out-of-Class Assignments

Out-of-Class Assignments are an extension of the clinical experience and provide an opportunity for students to research, apply, or practice concepts learned in the classroom. This type of reinforcement strengthens a student's understanding of course competencies. While the type of assignments and time require will vary from course to course and student to student, each student will be required to complete out-of-class assignments which will be included as part of the course final evaluation.

Professionalism

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to clinical. It is as important to 'practice' these interpersonal skills as it is to learn new intellectual content. Students will be evaluated on their professional demeanor in the clinical environment.

GRADING

Clinical Requirements:

1. **Assignments**: Client Activity Tool(s) (CATs), Case Studies, SimChart® assignments, journal entries, medication cards, and other projects as assigned.

2. **Student Participation**: Students must participate in clinical. Students will accept virtual client assignments and seek assistance from the nursing instructor when needed. Students are expected to take full advantage of all learning opportunities.

3. **Safety**: Student shall follow all aspects of safety by demonstrating knowledge of the National Patient Safety Goals.

4. **Clinical Attendance**: Virtual clinical attendance is required of all students.

   Note: In order to attain competency and meet the clinical objectives, a student must comply with virtual attendance regulations.

Grading Policy

Please refer to the campus catalog, and corresponding addendum, for the most current grading policy and grade scale.

A student earning a cut score of 75 or above is considered to have successfully completed the course and is eligible to pursue further studies. A student receiving a score of 74 or below has not successfully completed a course. A course that is not successfully completed must be repeated and the cut score of 75 achieved to meet graduation requirements.

REQUIREMENTS FOR SUCCESSFUL COMPLETION OF THE COURSE - CLINICAL

At a minimum, students must complete all required assignments, participate in virtual care and clinical skills, complete projects, and demonstrate adherence to the school attendance policy. It is the students' responsibility to seek the instructor's guidance at the time when a problem area is initially encountered, not after receiving an unsatisfactory grade.

A student whose performance does not meet the standard in one skill area does not successfully complete this course. All Students MUST perform at standard in all skill areas in order to successfully complete this course.

TOPICAL OUTLINE

Course Outline: Refer to the clinical competencies for complete information.

STUDENT CENTERED LEARNING ACTIVITIES

The following activities and projects selected for this course are targeted to encourage active student participation in class and provoke critical thinking skills required for the workplace. They will be incorporated at the instructor's discretion.

- Synchronous online delivery
- Recorded lectures with 14-day access
- Online assignments including case studies, YouTube video links, internet website links, Podcast audio

- Online Discussion Threads
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- Synchronous student-teacher video discussions through Canvas Conferencing
- Simulations, role play
- Group discussion
- Peer mentoring of other students
- Internet research and computer based learning and reporting
- Portfolio Development
- Cooperative Learning Groups
- Think-Pair-Share

DATE SYLLABUS WAS LAST REVIEWED

April 20, 2020

LINCOLN TECH®

GROUP OF SCHOOLS

Lincoln Technical Institute ■ Lincoln College of Technology
Lincoln Culinary Institute ■ Euphoria Institute of Beauty Arts & Sciences

May 7, 2020

Helen Smith MSN, RN
Department of Public Health
410 Capitol Avenue
PO Box 340308 - MS#12 HSR
Hartford, CT 06134-0308

Dear Ms. Smith,

I am writing as requested by the Connecticut Board of Examiners for Nursing during the November 2019 meeting to report on the status of Deborah Little. Debbie is Lincoln Technical Institute's Corporate Assistant Dean of Nursing and Program Administrator for the Shelton and New Britain PN programs. Debbie is approaching her year anniversary working with our Lincoln Technical Institute Practical Nursing programs.

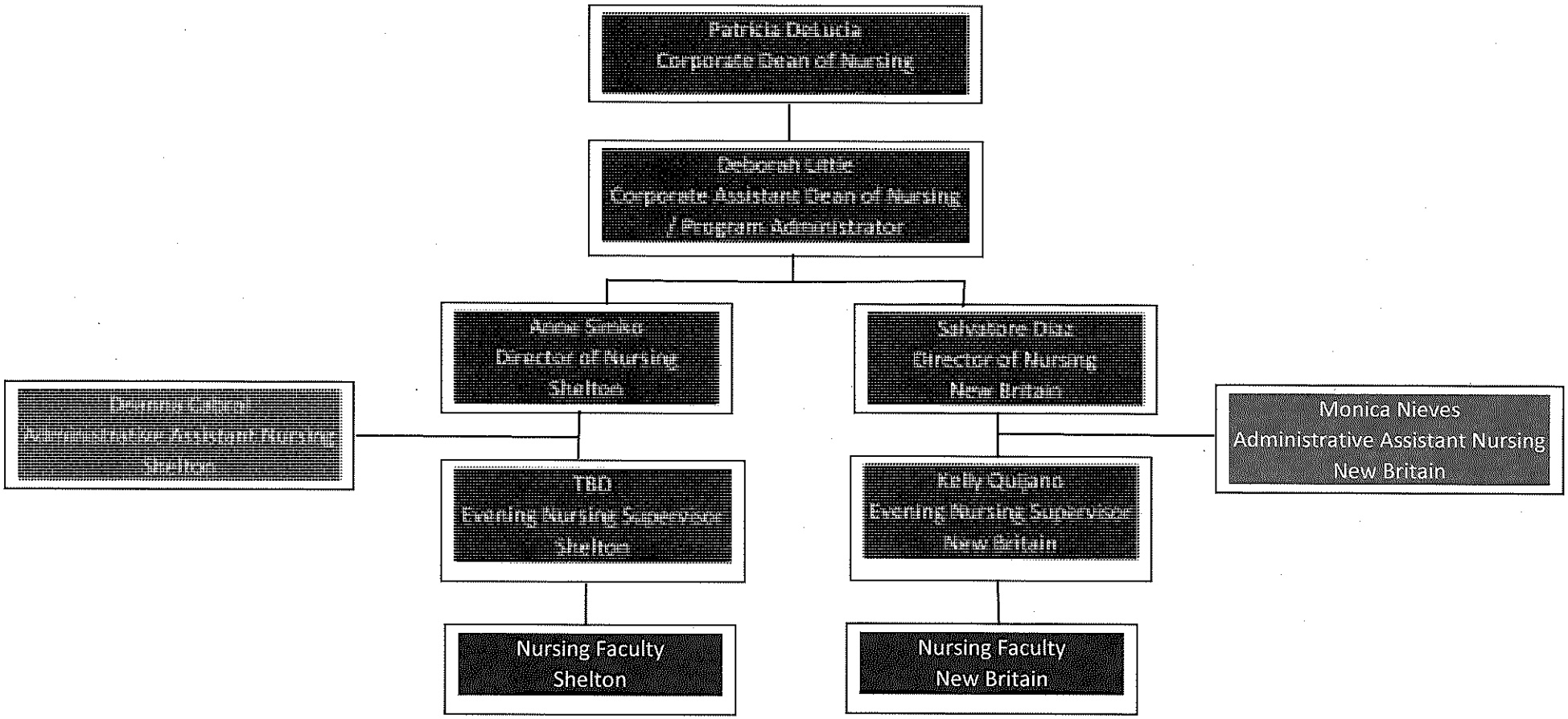
Debbie has fully acclimated to Lincoln and has proven to be a great asset to our nursing programs. She has a vast knowledge base of curriculum and accreditation. Debbie's many years of experience managing nursing programs and working in nursing education has allowed her a seamless transition to her role at Lincoln. Debbie has established positive working relationships with all our Directors and Assistant Directors of Nursing and nursing faculty. She takes every opportunity to share her knowledge and experience and genuinely enjoys mentoring the Directors and Assistant Directors of Nursing to enable them to elevate the standards of nursing in their programs. Debbie has continued her role as an ACEN Site Reviewer and values nursing programmatic accreditation.

Most recently, Debbie has been has been focused on the transition of our nursing programs to distance education with a concentration on curriculum integration and utilization of our many nursing resources. Debbie is currently participating in the orientation and onboarding of our new Director of Nursing, Salvatore Diaz, in the New Britain, CT nursing program. Debbie has also been instrumental in revising the New Jersey and Pennsylvania nursing curriculums.

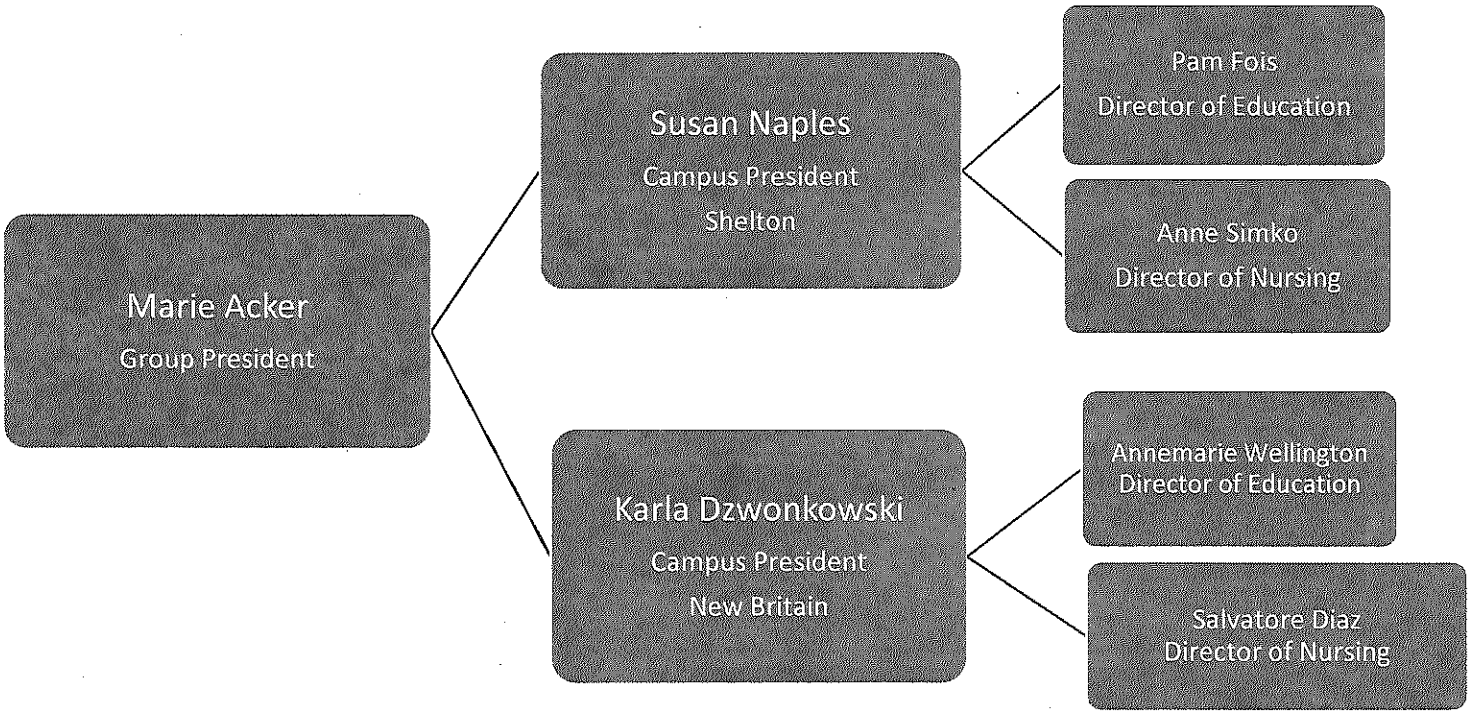
Thank you for your time and consideration. Please let me know if you have questions or require any clarifications. Debbie and I both look forward to attending the May 20, 2020 Connecticut Board of Examiners for Nursing meeting.

Sincerely,
Patty DeLucia, MSN, RN
Corporate Dean of Nursing, Lincoln Technical Institute
pdelucia@lincolntech.edu

Connecticut Nursing Management Organizational Chart



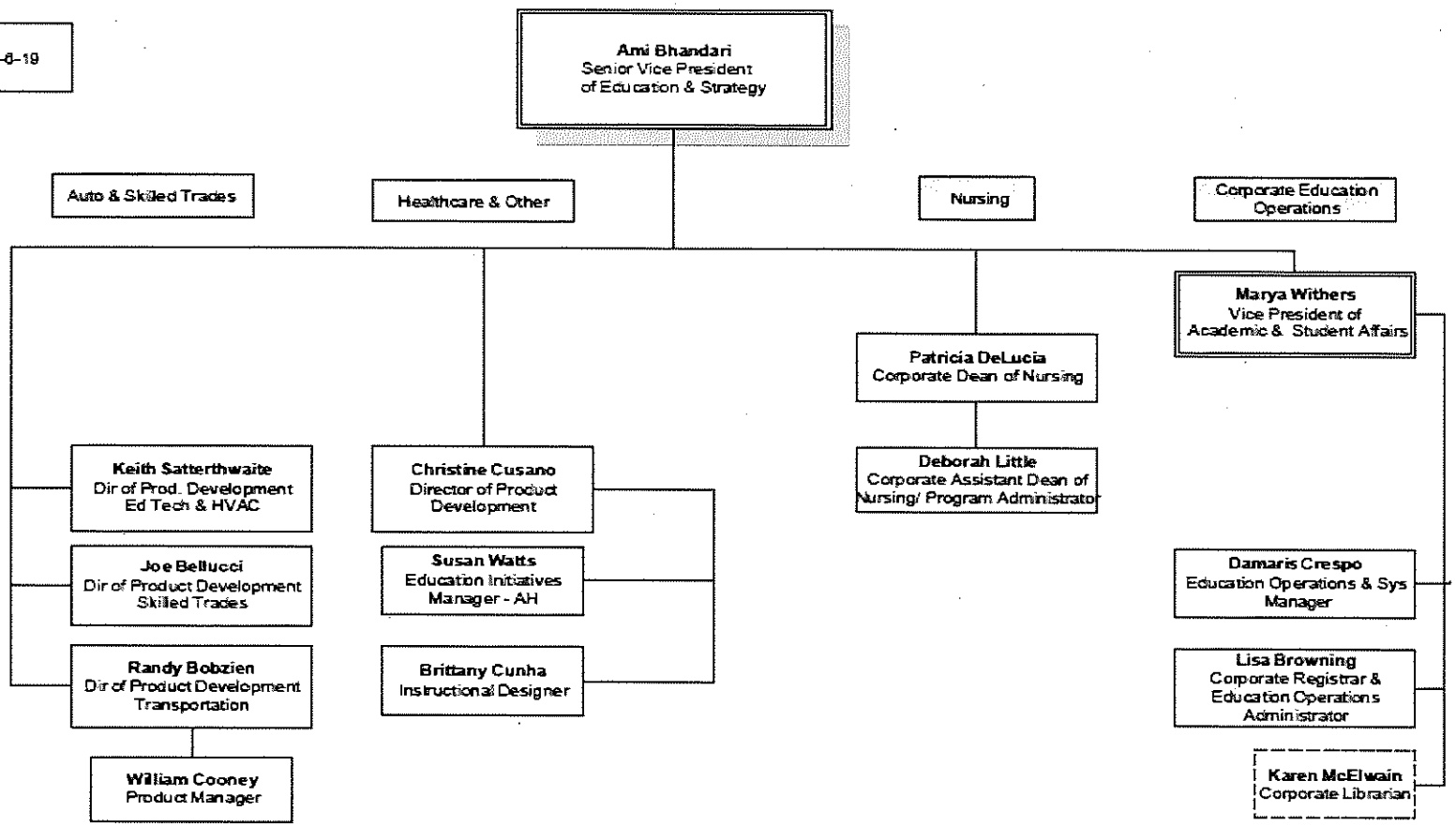
Connecticut Nursing Organizational Chart



Corporate Education and Nursing Leadership Chart

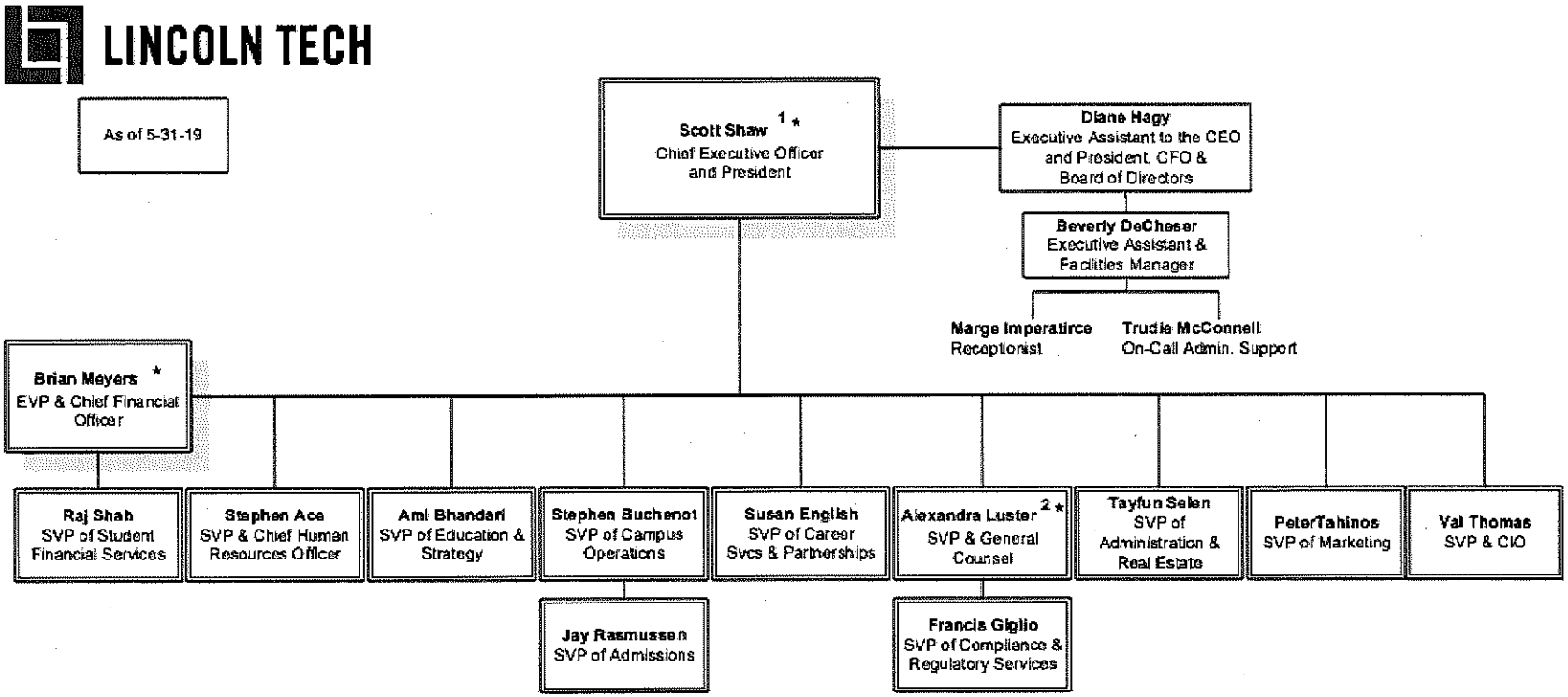
LINCOLN TECH

As of 9-6-19



represents resources shared with another department

Corporate Organizational Leadership Chart



LINCOLN TECH®

GROUP OF SCHOOLS

Lincoln Technical Institute ■ Lincoln College of Technology
Lincoln Culinary Institute ■ Euphoria Institute of Beauty Arts & Sciences

April 27, 2020

Helen Smith MSN, RN
Department of Public Health
410 Capitol Avenue
PO Box 340308 - MS#12 HSR
Hartford, CT 06134-0308

Dear Ms. Smith,

I am writing to inform you of a recent administrative change that has occurred within the nursing program of Lincoln Technical Institute's New Britain campus. The interim Director of Nursing position has been replaced with a permanent Director of Nursing, Salvatore Diaz. We are excited to welcome Sal back into the Lincoln family! Sal was employed in the former New England Technical Institute New Britain nursing programs in 2003 through 2006 as the Evening Program Manager and Director of Distance Education for the New Britain evening nursing program. Sal has held various management positions in nursing since leaving Lincoln Technical Institute.

Thank you for your time and consideration. Salvatore Diaz, Patricia DeLucia and I will plan to attend the BOEN meeting May 20, 2020.

Kind Regards,

Deborah Little

Deborah Little EdD, RN, CNE
Corporate Assistant Dean of Nursing for Lincoln Educational Services
dlittle@lincolntech.edu
973-736-9340 (office) / 201-927-0724 (mobile)

cc: Marie Acker, Group Vice President
Karla Dzwonkowski, Campus President, New Britain
Patricia DeLucia MSN, RN, Corporate Dean of Nursing

SALVATORE DIAZ, RN MSN

82 Worcester Avenue, Waterbury, CT 06705 | Tel: (203)-240-0290 | Email: saldiazrn@aol.com

PROFESSIONAL STRENGTHS

- Operational excellence and process improvement
- Possess strong analytical and interpersonal skills
- Strong Team player and excellent communicator
- Energetic, optimistic and enthusiastic
- Strong problem solving and conflict resolution skills
- Developing and implementing educational programs for physicians and nurses with a focus on standards of safe practice
- Possess more than nineteen years of nursing experience duties including direct care, nursing informatics, nurse consultant, organizational redesign and nursing management

EXPERIENCE

Lincoln Tech, New Britain, CT — April 13, 2020 – Present
Director of Nursing

Department of Corrections, Wethersfield, CT — Dec 2018 – Apr 2020
Regional Director of Nursing

- Directs the staff and operation of the nursing department statewide to ensure safe practice within the nursing scope of practice and standards
- Coordinates, plans and manages nursing activities; formulates program goals and objectives statewide with focus on safe nursing practice while ensuring adherence to nursing standards
- Develop staffing plans to meet organizational needs and prepares the nursing budget statewide
- Develops or assists in the development of related policy incorporating current nursing research and professionally recognized standards
- Develop and implementation of plans for nursing care; interprets and administers pertinent laws; evaluates staff
- Oversee the infectious disease nursing program statewide
- Oversee nursing education development and delivery
- Oversee the CNA inmate program statewide
- Takes responsibility for overall planning, execution and successful implementation of the eMAR program
- Manage the recruitment and hiring process for all nursing staff statewide

PeraHealth Inc., Charlotte, NC — Feb 2017 – Dec 2018
Director, Account Management

- Provided leadership and mentoring in an innovative and fast paced environment
- Served as a liaison between PeraHealth and its clients, responsible for planning and managing key accounts to maximize revenue and profit opportunities, while aiming to achieve the highest levels of customer satisfaction
- Managed the overall account relationship and the implementation of the PeraHealth solution
- Supported the C-suite leadership team and collaborates with physicians and nursing leadership in organizational activities intended to ensure excellence in the delivery of patient care

- Collaborated with the executive leadership team to successfully create measures and meet quality goals for both nursing and physicians
- Responsible for overall planning, execution and successful implementation of complex technical and clinical deployment projects
- Established and fosters a trusted partnership relation with existing clients through exceptional delivery of PeraHealth solutions and services, and continuous maintenance of executive-level relationships
- Communicated effectively externally and internally with project and customer stakeholders keeping them updated with the status and any roadblocks or potential issues
- Lead and engaged the internal technical and clinical teams when appropriate to support the customer

Connecticut Hospital Association, Wallingford, CT Jan 2015- Feb 2017
Director of Clinical Informatics

- Worked in collaboration with the clinical leadership at the member hospitals to translate information into meaningful information to the end user
- Led the nursing quality improvement activities related to the CMS HEN 2.0 program
- Provided the content expertise in quality and patient safety for data analytics and development of new quality analytical solutions for our member hospitals
- Managed the measures and data requirements for the CMS initiatives in quality and patient safety
- Coached, consulted, directed and facilitated the transfer of data analytics and health information supporting the mission of the members
- Utilized clinical and Informatics knowledge to support the design and development of innovative solutions based on best practice and leading-edge design principles
- Provided assistance for all ad-hoc analysis, including determining data sources and maintaining knowledge of data requirements and reporting methods to assist hospitals in maintaining compliance
- Communicated effectively between technical and clinical staff

MBA HealthGroup, Burlington, VT Jun 2012 – Jan 2015
Senior Clinical Consultant

- Project manager for a large Electronic Health Record (EHR) software company
- Led the clinical application team for a 400 physician multi-specialty organization in Florida (Top 10 largest healthcare system in the U.S.) overseeing the total system configuration including maintenance and implementation
- Served as the clinical and subject matter expert on the physician organization's Clinical Advisory Board.
- Expert in the conception and implementation of data collection tools to be employed throughout the rapid implementation of Allscripts TouchWorks EHR
- System configuration and note build expert
- Experienced in the evolution of fresh teams and restructuring of existing teams to match the organization's goals
- Optimization and workflow redesign expert including providing a gap analysis for the client
- Provided numerous end user trainings as well as training for new analysts on Allscripts TouchWorks EHR
- Well versed in system upgrades along with the design of upgrade testing plans and coordination of all related activities
- Served as a resource for other senior and junior consultants

Hartford Healthcare, Hartford, CT — Oct 2009 – Jun 2013
Consultant / Clinical Analyst

- Served as the clinical documentation lead
- Led the team in planning, building, implementing and supporting the Allscripts TouchWorks EHR
- Developed the tools utilized for rapid implementation and system configuration
- Ensured the functionality was consistent with professional standards of clinical practice
- Functioned as the liaison and clinical expert to the Clinical Advisory Board
- Managed the impact of technology implementation to optimize clinical work processes
- Led the curriculum development for both classroom and online training programs
- Responsible for the build, workflow and report writing for meaningful use, PCMH and ACO programs

Hospital of Central Connecticut, New Britain, CT — May 2006 – Oct 2009
Clinical Informatics Nurse Specialist /Off Shift Nursing Administrator — Oct 2007 – Oct 2009

- Project management
- Led the development of the training curriculum for new projects
- Provided consultation to Shared Governance projects intended to support development and implementation of evidence-based practice standards
- Developed and implemented orientation programs and ongoing continuing education
- Facilitated the discussions related to the design, processes, workflows and the functionality of the systems for the shared governance subcommittee and councils
- Clinical documentation expert in the design, build, and implementation of the system
- Determined clinical functions for computer applications to assure that information systems functionality was consistent with professional criteria of clinical practice
- Coordinated the rollout for system upgrades and enhancements
- Facilitated process redesign within departments throughout the hospital
- Participated in the ongoing evaluation, selection and integration of new applications
- Developed/updated system policies, procedures and performance improvement plan to reflect compliance with regulatory requirements of direct end users

Clinical Nurse Manager, Critical Care — May 2006 – Oct 2007

- Directed the delivery of patient care and daily unit operations of the critical care unit ensuring safe practice within nursing scope of practices and standards
- Maintained knowledge of the yearly budget. Collaborated with the director on the monthly variance analysis to develop and implement action plans when needed
- Develops or assists in the development of related policy incorporating current nursing research and professionally recognized standards
- Develop and implementation of plans for nursing care; interprets and administers pertinent laws
- Promoted effective working relationships and teamwork among staff and other departments
- Manage the recruitment and hiring process for all nursing staff in critical care

Waterbury Hospital, Waterbury, CT — Mar 2005 – Jun 2016
Off Shift Nursing Administrator

St Mary's Hospital, Waterbury, CT — Jun 2001 – Oct 2013
Registered Nurse CCU/ICU/ ER

Community Living Corp, Mount Kisco, NY — Dec 2000 – Jun 2001
License Practical Nurse

TEACHING EXPERIENCE

New England Technical Institute, New Britain, CT — Oct 2003 – May 2006
Nursing Program Manager/Director of Distance Education

- Oversaw the nursing program across multiple campuses
- Created and implemented the entire evening nursing program
- Evaluated the program/student placement effectiveness on an ongoing basis
- Educated and marketed the roles and responsibilities of nursing to a variety of audiences in the lay and professional community
- Created, developed and maintained the curriculum for all distance learning courses
- Provided the technical support and training to all students in the distance learning program
- Actively participated in creating, reviewing and revising the curriculum to meet the needs of the changing student population

VOLUNTEER EXPERIENCE

Self Inc — Jan 2018 – Present
Board of Directors / Nurse Consultant

- Revised and implemented new clinical policies and procedures to include guidelines for the medication supervision program
- Ensure agency is compliant with DHMAS protocols, nursing practice and adhere to nursing standards
- Consultant on client recovery plans
- Advisor in budget planning/ oversite of administration staff

The Greater Waterbury Scholarship Program — Dec 2014 – Present
Local Executive Director

- Provides leadership, guidance and maintains the financial records
- Established and maintains the organization as a non-for-profit entity
- Works in collaboration with the state executive director of the Miss Connecticut organization promoting the Miss Connecticut and Miss America Organization

EDUCATION

University of Hartford, Hartford, CT | **Master's Degree in Nursing Education**
Western Connecticut State University, Danbury, CT | **Bachelor's Degree in Nursing**

PROFESSIONAL LICENSURE

Connecticut State - Registered Nurse (License number: 066549)

WESTERN CONNECTICUT STATE UNIVERSITY

OFFICE OF THE REGISTRAR
DANBURY, CT 06810

NAME: Salvatore Diaz
5A Woodside Ave Unit 31
Danbury, CT 06810

DEGREE PROGRAM: Bachelor of Science MAJOR: Nursing MINOR:

DEP	CRS	SF	GR	CRDT	COURSE TITLE
				Fall/1996 - Transferred	
SUNY at Cobleskill (60.0)					
CTA	162		T	3.00	Interpers Communic
ENG	991		T	3.00	General Ed Elective
PSY	100		T	3.00	Intro Psychology
SOC	100		T	3.00	Intro to Sociology
ECO	100		T	3.00	Princ of Macroecon
PSY	205		T	3.00	Social Psychology
CS	100		T	3.00	Fndmntls of Compat
CS	280		T	3.00	Cobol I
PE	991		T	2.00	General Ed Elective
ENG	145		T	3.00	Engl Composition I
ACC	201		T	3.00	Financial Acct'g
ECO	101		T	3.00	Princ of Microecon
MGT	250		T	3.00	Organiz'l Behavior
ACC	202		T	3.00	Managerial Acct'g
REG	100		T	16.00	Free Elective
ACC	340		T	3.00	Business Law I
UND SEM ATTEMPT:				60.00 ERN: N/A	QPts: N/A GPA: N/A
UND CUM ATTEMPT:				0.00 ERN: 0.00	QPts: 0.00 GPA: 0.00
				Fall/1996 - Undergraduate	
BIO	105		W	4.00	Anatomy & Physiology I
CHE	100		C	4.00	Concepts of Chemistry
UND SEM ATTEMPT:				4.00 ERN: 4.00	QPts: 8.00 GPA: 2.00
UND CUM ATTEMPT:				4.00 ERN: 4.00	QPts: 8.00 GPA: 2.00
				Spring/1997 - Undergraduate	
CHE	120		B-	4.00	Survey of Chemistry I
UND SEM ATTEMPT:				4.00 ERN: 4.00	QPts: 10.68 GPA: 2.67
UND CUM ATTEMPT:				8.00 ERN: 8.00	QPts: 18.68 GPA: 2.34
				Summer/First/1997 - Undergraduate	
CHE	121		C+	4.00	Survey of Chemistry II
UND SEM ATTEMPT:				4.00 ERN: 4.00	QPts: 9.32 GPA: 2.33
UND CUM ATTEMPT:				12.00 ERN: 12.00	QPts: 28.00 GPA: 2.33
				Fall/1997 - Undergraduate	
BIO	105		C-	4.00	Anatomy & Physiology I
ENG	146		C+	3.00	English Comp II: Writing about Lit
HSC	205		A-	2.00	Nutrition and Health
UND SEM ATTEMPT:				9.00 ERN: 9.00	QPts: 21.01 GPA: 2.33
UND CUM ATTEMPT:				21.00 ERN: 21.00	QPts: 49.01 GPA: 2.33
				Spring/1998 - Undergraduate	
ART	115		A-	3.00	Ceramics
BIO	106		C	4.00	Anatomy & Physiology II
MAT	115		B	3.00	Introduction to Biostatistics
PHI	111		B	3.00	Ethical Issues in Health Care
PHI	112		B	3.00	Ethics & the Non-Human
UND SEM ATTEMPT:				16.00 ERN: 16.00	QPts: 46.01 GPA: 2.88
UND CUM ATTEMPT:				37.00 ERN: 37.00	QPts: 95.02 GPA: 2.57

DEP	CRS	SF	GR	CRDT	COURSE TITLE
				Summer/First/1998 - Transferred	
Naugatuck Valley Comm Tech College (4.0)					
BIO	215		T	4.00	Microbiology
UND SEM ATTEMPT:				4.00 ERN: N/A	QPts: N/A GPA: N/A
UND CUM ATTEMPT:				37.00 ERN: 37.00	QPts: 95.02 GPA: 2.57
				Summer/First/1998 - Undergraduate	
BIO	105		B	4.00	Anatomy & Physiology I
UND SEM ATTEMPT:				4.00 ERN: 4.00	QPts: 12.00 GPA: 3.00
UND CUM ATTEMPT:				41.00 ERN: 41.00	QPts: 107.02 GPA: 2.61
				Fall/1998 - Undergraduate	
HSC	160		A-	2.00	First Aid and Safety
NUR	201		B-	4.00	Introduction to Physical Assessment
NUR	205		B+	4.00	Fundamentals of Nursing
UND SEM ATTEMPT:				10.00 ERN: 10.00	QPts: 31.34 GPA: 3.13
UND CUM ATTEMPT:				51.00 ERN: 51.00	QPts: 138.36 GPA: 2.71
				Spring/1999 - Undergraduate	
GEO	100		B	3.00	Principles of World Geography
NUR	225		A-	2.00	Scientific Princ Undrlying Nur Prac
NUR	230		B	3.00	Principles of Community Health
NUR	235		B-	5.00	Clinical Nursing Practice I
NUR	300		B-	4.00	Mental Health Nursing
UND SEM ATTEMPT:				17.00 ERN: 17.00	QPts: 49.37 GPA: 2.90
UND CUM ATTEMPT:				68.00 ERN: 68.00	QPts: 187.73 GPA: 2.76
				Fall/1999 - Undergraduate	
JLA	208		B+	3.00	Forensics I
NUR	255		C	6.00	Clinical Nursing Practice II
NUR	361		A	2.00	Research Process in Nursing
UND SEM ATTEMPT:				11.00 ERN: 11.00	QPts: 29.99 GPA: 2.73
UND CUM ATTEMPT:				79.00 ERN: 79.00	QPts: 217.72 GPA: 2.76
				Spring/2000 - Undergraduate	
JLA	311		B+	3.00	Forensics II
NUR	335		C	8.00	Clinical Nursing Practice III
NUR	374		C+	2.00	Leadrshp & Mgmnt in Nursng Practic
UND SEM ATTEMPT:				13.00 ERN: 13.00	QPts: 30.65 GPA: 2.36
UND CUM ATTEMPT:				92.00 ERN: 92.00	QPts: 248.37 GPA: 2.70
				Summer/First/2000 - Undergraduate	
MUS	106		A-	3.00	Class Piano I
UND SEM ATTEMPT:				3.00 ERN: 3.00	QPts: 11.01 GPA: 3.67
UND CUM ATTEMPT:				95.00 ERN: 95.00	QPts: 259.38 GPA: 2.73
				Summer/Second/2000 - Undergraduate	
HIS	101		B	3.00	American Perspectives
UND SEM ATTEMPT:				3.00 ERN: 3.00	QPts: 9.00 GPA: 3.00
UND CUM ATTEMPT:				98.00 ERN: 98.00	QPts: 268.38 GPA: 2.74

WESTERN CONNECTICUT STATE UNIVERSITY

OFFICE OF THE REGISTRAR
DANBURY, CT 06810

NAME: Salvatore Diaz
5A Woodside Ave Unit 31
Danbury, CT 06810

DEGREE PROGRAM: Bachelor of Science MAJOR: Nursing MINOR:

DEP	CRS	SF	GR	CRDT	COURSE TITLE
					Fall/2000 - Undergraduate
NUR	325		B-	7.00	Nursing Childbear/Childrear Family
NUR	330		A	4.00	Nursing in the Community
	UND SEM ATTEMPT:			11.00	ERN: 11.00 QPts: 34.69 GPA: 3.15
	UND CUM ATTEMPT:			109.00	ERN: 109.00 QPts: 303.07 GPA: 2.78
					Spring/2001 - Undergraduate
NUR	375		B+	5.00	Nursing Practicum
	UND SEM ATTEMPT:			5.00	ERN: 5.00 QPts: 16.65 GPA: 3.33
	UND CUM ATTEMPT:			114.00	ERN: 114.00 QPts: 319.72 GPA: 2.80
	UND TTL CREDITS:			178.00	EXM: 0.00 TRF: 64.00 P/F: 0.00

****
Bachelor of Science
Major: Nursing
Awarded: May 20, 2001
****

** No entries after this line. **

MAY 30 2001

REGISTRAR
UNOFFICIAL

University of Hartford

200 BLOOMFIELD AVENUE
WEST HARTFORD, CT 06117

Record of: Salvatore Diaz
Student No:

Date Issued: 04-JUN-2007

U N O F F I C I A L

Course Level: Graduate
Matriculated: Fall Term 2005

Current Program:
College : Educ., Nursing & Health Prof.
Major : Nursing

Degree Awarded : Master of Science Nursing 20-MAY-2007
Major : Nursing

SUBJ NO.	COURSE TITLE	CRED	GRD	PTS	R

INSTITUTION CREDIT:

Fall Term 2004
Unassigned
No Major
NUR 693 ST:Politics/Nursing/Healthcare 3.00 A 12.00
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 12.00 GPA: 4.00
Good Standing

Spring Term 2005
Unassigned
No Major
NUR 609 Perspective Transformation I 3.00 A 12.00
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 12.00 GPA: 4.00
Good Standing

Summer Term 2005
Unassigned
No Major
EDT 635 Learning About Distance Ed. 3.00 A 12.00
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 12.00 GPA: 4.00

Fall Term 2005
Educ., Nursing & Health Prof.
Nursing
NUR 615 Th of Lrning&Teach Health Prof 3.00 A 12.00
********** CONTINUED ON NEXT COLUMN **********

SUBJ NO.	COURSE TITLE	CRED	GRD	PTS	R

Institution Information continued:
NUR 621 Advanced Nursing Practice 3.00 A 12.00
Ehrs: 6.00 GPA-Hrs: 6.00 Pts: 24.00 GPA: 4.00
Good Standing

Spring Term 2006
Educ., Nursing & Health Prof.
Nursing
NUR 619 Scholarly Inquiry in Nursing 3.00 A- 11.01
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 11.01 GPA: 3.67
Good Standing

Summer Term 2006
Educ., Nursing & Health Prof.
Nursing
NUR 635 Graduate Research 3.00 A 12.00
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 12.00 GPA: 4.00

Fall Term 2006
Educ., Nursing & Health Prof.
Nursing
NUR 610 Theoretical Perspectives Nur 3.00 A- 11.01
NUR 627 Theor.Basis Nursing Education 3.00 A 12.00
Ehrs: 6.00 GPA-Hrs: 6.00 Pts: 23.01 GPA: 3.83
Good Standing

Spring Term 2007
Educ., Nursing & Health Prof.
Nursing
NUR 631 Practicum&Seminar Nursing Ed. 4.00 P 0.00
NUR 633 Prespective Transformation II 3.00 A 12.00
********** CONTINUED ON PAGE 2 **********

University of Hartford

200 BLOOMFIELD AVENUE
WEST HARTFORD, CT 06117

Record of: Salvatore Diaz
Student No:

Level: Graduate

Date Issued: 04-JUN-2007

U N O F F I C I A L

SUBJ	NO	COURSE TITLE	CRED	GRD	PTS	R

Institution Information continued:
Ehrs: 7.00 GPA-Hrs: 3.00 Pts: 12.00 GPA: 4.00

********** TRANSCRIPT TOTALS **********

	Earned Hrs	GPA Hrs	Points	GPA
TOTAL INSTITUTION	34.00	30.00	118.02	3.93
TOTAL TRANSFER	0.00	0.00	0.00	0.00
OVERALL	34.00	30.00	118.02	3.93

********** END OF TRANSCRIPT **********

Smith, Helen

From: Debra Hessell <dhessell@porterchester.com>
Sent: Thursday, May 7, 2020 11:49 PM
To: Smith, Helen
Subject: Porter and Chester May submission
Attachments: Debra Hessell - opening statement to BOEN 4-15-2020.pdf; Sherry Greifzu statement to BOEN 4-15-2020.pdf; Request for consideration for Porter and Chester Institute to offer Virtual Clinical Simulation.pdf; Nursing Consultant recommendations based on interviews with staff supervisors and review of the program.pdf; Porter and Chester NCLEX outcomes reponse.pdf

Good evening

Please find attached, our submissions for consideration the May meeting. I am also attaching the statements as requested form the last meeting. I am not sure whether you received them after the meeting or not so, I thought it best to include them again. I do apologize that these are late arriving in your inbox, I have been at the endodontist for most of the day for a dental emergency.

I hope you are staying well.

Regards

Debra

Debra Hessell MSN Ed
Acting Director of Nursing
Porter and Chester Institute
774-239-2876 (mobile)
www.PorterChester.com
Find us on Facebook

PORTER AND CHESTER INSTITUTE

Our mission is to support committed students in achieving the technical and professional skills needed for their chosen career through industry-modeled student-centered education and training.

Good morning

I would again like to thank you for taking the time to review our comments to the presentation by Ms. Smith at last month's meeting.

To summarize our thoughts on the report, it is our belief and opinion that the information you received was unbalanced, focusing on isolated negative incidences and yet you were not made aware of any of the positive attributes of our program. When focusing on isolated, negative occurrences, it becomes harder for you to lose sight of the fact that, these are students, working within a learning environment and that such isolated occurrences probably happen with students from other institutions.

There are, as you will have observed, many comments that we disagree with or, have put the incident in context. We take issue with comments that the program is unsafe as this is not fair nor, is it based on fact. This damages the reputation of Porter and Chester and that of the hard work of faculty and staff in producing future health care professionals, to provide quality care for the population of the State of Connecticut. We have spent enormous time and effort to responding to every alleged deficiency without question. However, we want you to know that we have a very good program that we are all very proud of.

I would like to now ask Sherry Greifzu, the education consultant introduced at last month's meeting to read her statement. She has been reviewing our corrective action plans and program over the past month and working with myself to address the "alleged" deficiencies.

April 17, 2020

Patricia Bouffard, RN, MSN, Chairperson
State of Connecticut Board of Examiners for Nursing
410 Capitol Avenue, MS #13PHO
P. 0. Box 340308
Hartford, CT 06134-0308

Dear Ms. Bouffard and Members of the Board,

Please see the enclosed written document that memorializes my presentation to the Board on April 15, 2020.

First, I would like to thank the Board for its time, patience and willingness to listen to my report that I presented at the Board's meeting on April 15, 2020 on behalf of Porter and Chester Institute. I also would like to take this opportunity to clarify an answer that I provided during the meeting that I feel I did not adequately explain. Specifically, a member of the board asked me if I would agree that the PCI students and the PCI instructors were engaged in unsafe practices if such students and faculty were unaware of the facility's policies and procedures. I answered the question presented by the Board by saying, "yes", but I did not get the opportunity to explain the context in which I provided my response.

It is an obligation for academic leaders to regularly evaluate their faculty for best practices and opportunities for improvement. PCI is committed to assure their employees (faculty) teach to the utmost safety and standards of nursing care, which is evident by the corrections that have already been made and the action plan I presented yesterday to the Board. However, it is also a reality that when educators go into facilities, the policies and procedures are not always readily accessible. Of course, that is not an excuse for knowing where they are and teaching the students to reference them.

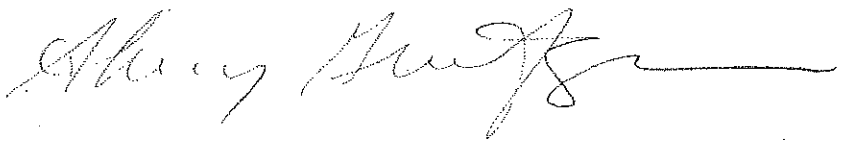
In the instant case, there were no actual situations where any patients were put at risk or any actions taken by the students that resulted in any harm to the residents being cared for. The question as presented by the Board member was answered by me without proper context. While I wholeheartedly agree that it is generally unsafe to practice nursing without being aware of relevant policies and procedures, it is also true, based upon my review of the DPH surveyor's findings, that none of the students caused any harm or put any residents at risk.

Nevertheless, PCI will make sure that all of its instructors integrate the importance of being aware and informed about the facility's policies and procedures. It is an obligation for academic leaders to always evaluate their faculty for best practices and opportunities for improvement. PCI is committed to assure their employees (faculty) teach to the utmost safety and standards of nursing care, which is evident by the corrections that have already been made and the action plan I presented yesterday to the BON.

I am confident, as their education consultant, and as a professional nurse, that PCI will continue to succeed in meeting all safety standards to provide the best education for their students and nursing care for the patients in the clinical setting.

Thank you again for allowing me to present to the BON yesterday.

Very truly yours,



Sherry Greifzu, RN, MSN, AOCN, NEA-BC

Good Morning, Ms. Bouffard and Members of the CT BON

Thank you for allowing me the opportunity to address the Board this morning.

My name is Sherry Greifzu, and as an educational Consultant, I have been engaged by PCI to review and assess the Board's findings and concerns about the PCI PN program and to make recommendations to ensure that the PCI PN program satisfies all regulatory requirements.

I am pleased to have the opportunity to perform this assessment and review, because I value the PN programs. I have found throughout my experience, as a manager, an educator, as a CNS, and as adjunct faculty, that Practical Nurse programs provide a pipeline for students to enter the AD and BSN programs, while meeting a critical need for nursing staff in the many areas of healthcare delivery.

It is the role and responsibility of the faculty and clinical educators to educate, nurture, coach, and support the students throughout their program and to set the students up for success.

My Consulting Process began with the objectives of:

*Reviewing the Board's findings and concerns over this past 9 months, (March 2020) and responding with action plans for correction

*Conducting a gap analysis of the Board's findings and the work that exists or has changed

*Evaluating the curriculum and its learning objectives

*Reviewing each course's substantive content to evaluate the objectives and review for clarity, identify gaps and make recommendations for corrective action

*Review and assess the faculty and clinical educators for

- Their education background, experience and qualifications as an educator
- Preparedness for the course curriculum and ability to uphold the education theory and evaluate student performance and outcomes
- Their effectiveness as an educator
- Their ability to translate the content to the bedside and clinical rotations
- Observe their interaction and face to face support of the student in the classroom and in clinical practice
- Their grasp of PCI and facility policies and procedures and standards of practice of nursing in the specific clinical and practice environments

- How they prepare for clinical and teach the students
- How they prepare the students for the NCLEX exam
- How they assist the Director of the Practical Nursing program and the leadership team of PCI, in evaluating the quality of the program and the ability to make recommendations for improvement

But First:

I want to inform you of my previous experiences, in hopes that I can gain your trust and confidence in addressing an outstanding concerns that the Board may have with respect to the PCI PN program.

I have extensive experiences in nursing education, curriculum development, as well as on-site evaluations of faculty at academic nursing programs, which includes, Maria College in Albany NY, Post University in Waterbury, CT, and Franklin Pierce University in NH. In my professional nursing clinical practice experience, I have been responsible for developing and guiding the education and curriculum development for the general and nursing specialty practices to meet quality, Safety and ANA standards. (Mount Sinai Med Ctr in NY, Dartmouth Med Ctr in NH, CCMC in CT,) These programs, included the range of the healthcare licensed and unlicensed professionals. I am happy to provide copies of my CV to the Board today.

I have worked with the Boards of Nursing in VT, New Hampshire, and also spoke with some of you in evaluating the programs for CCMC. You were very supportive when I was revising the Medical Assistant orientation and scope of practice standards, and competency education program.

My intent in describing my experience is to gain your confidence in that I may work with PCI to demonstrate the quality of its educational program and make improvements as identified by the Board.

Findings:

To begin with, we are all challenged with the Covid- 19 pandemic, which is preventing me (us) from doing the face to face on site evaluation of the faculty, instructors and processes that I have defined in my report. I anticipate that this can start occurring in a methodical process within 2 months, or after the stay at home mandate has lifted.

I will work with the Acting Director of Nursing, The Assistant Director of Nursing, The Director of Clinical Experience and, the individual campus Education Supervisors - in the formulation of strategic evaluation plans in conducting extensive face to face, just in time evaluations of all faculty.

My initial findings and strengths of the program are:

I want to assure the Board that
PCI **does have a robust PN program** both in content and academic success as evidenced by an 85% pass rate in NCLEX results as well as an 81% (129/159) in employment in work positions post-graduation.

In reviewing the objectives and fundamentals of each course, I find that the goals and objectives for each course are clear, well-articulated and support the content and associated learning objectives and stated outcomes.

PCI also has a robust curriculum, hosted through the Canvas platform. The curriculum provides a variety of learning methods to promote student learning, examples of which are: faculty driven instruction, subject specific videos, case studies, in-class assignments, independent study, NCLEX review questions, as well as one to one and classroom faculty /student interaction.

PCI is very committed to their students' success, and follows policies and procedures in supporting students to meet the academic requirements of the program.

The willingness of the PCI leadership team to address the specific individual findings from the site visits in Feb and March, as noted in PCI's response to you today is really quite impressive;

The Interim Director, Debra Hessell, has:

Revised the faculty observation frequency, and put action plans in place

Created just in time infection control student monitoring
Pre and post conference planning, content and student expectations

Taken action and terminated faculty not adhering to the standards of nursing practice and student support and guidance

Revised and assured checklists and orientation sheets for each specific clinical site are completed to assure students and faculty educators are aware of the clinical sites' requirements and nursing policies and procedures

Met with clinical faculty, campus PN Education Supervisors and, the Director of Clinical Experience to review the Medication policies and

procedures, End of life instructions, and advanced directives, HIPPA adherence, Residents' rights, as well as the student's progress and plans.

Met with some clinical faculty to assure patient assignment knowledge and roles and expectations for each other (PCI and the clinical site) that policies and standards are followed and upheld.

You have already reviewed the responses that PCI provided to you regarding the department's findings. I will address a few just now.

After reviewing the course content and the policies, program guidelines, the handbook, the expectations of the program, the documented expectations of the staff, and the revisions that were made or added, following the latest evidence,

Although I am very impressed overall with the program and the dedication of its nursing leadership, I believe the Achilles heel may be with the standardization of the instruction provided by some of its faculty and the ability of some of its faculty to adhere to the PCI learning objectives. Therefore, it is in my opinion, that PCI may need to spend additional time working with its faculty to conduct ongoing additional performance reviews to validate their competence and performance, (for the classroom and the face to face observation at the clinical rotations.)

PCI hires appropriately credentialed faculty, who have impressive nursing careers. To ensure standardization and consistency of content delivery and clinical site supervision and mentoring of students, PCI is currently working on a comprehensive classroom and clinical on-boarding program and in addition, will continue to develop and apply, ongoing quarterly evaluation of its faculty to ensure that they are in compliance with PCI educational and clinical standards to ensure safe, standardized, quality education to the PN students so that they may excel in this program, consistently follow standards of healthcare and nursing practice, to provide the best quality, safe patient care possible.

To That end, in collaboration with the Acting DON, I have created step by step processes and tools, in which the Acting Director and Assistant Director of Nursing, the Director of Clinical Experience and the PN Education supervisors will use to evaluate, and observe each educator, face to face, in real time, in their education delivery and follow through for the students at the different sites, (classroom and clinical environments)

The face-to-face evaluation and monitoring of the instructor/educator, while teaching the students will include:

How skilled the educator is in their knowledge and delivery of the subject matter
The educator's preparedness
How their behaviors and delivery style is provided to the student
The continual support provided to the student in the classroom, campus clinical lab, and the clinical experience
The just in time correction when students fail to follow standards of practice within the campus clinical lab and during their clinical experience

This process will provide insight of the educator's ability and performance as an educator; to identify deficits, within their student interactions, preparedness; and discover their consistency in following safety and healthcare standards, which will guide PCI in their staff development correction efforts.

These "How to" action steps will be used to ensure the necessary changes in the program, and will support the standardization of the nursing education delivery provided at each PCI site and clinical rotation environment.

We will also incorporate a student assessment survey after each course, to not only evaluate the course and content, but also evaluate the instructor and use this feedback for future and ongoing improvements for the program.

In summary,
PCI and I are confident that when we complete these steps and follow up evaluations, and validate the faculty's performance, we will confirm that the findings that were identified in your report of March,2020, were outliers (which were handled immediately with the termination of staff and the correction of the findings,) to an existing strong PN program.

However, if we discover that there are needed improvements in the areas that were cited in the department's report which PCI responded to today, we are confident that we can address them and correct them to meet the BOEN's standards.

As I mentioned earlier, as soon as the Covid -19 stay at home mandate is lifted, we anticipate (and would like to) start this process within 2 months, and have it completed with the faculty evaluation and follow through within another 2 months, by August2020.

Thank you. Any questions?

Request for consideration for Porter and Chester Institute to offer Virtual Clinical Simulation

Background for application

Porter and Chester Institute currently has approximately 65-70 students who were unable to graduate in April 2020, due to the inability to complete their required clinical hours brought about by the current COVID-19 pandemic. As the Board is fully aware, the Department of Public Health (DPH) issued a statement on March 13, 2020 requiring all nursing home facilities, residential care homes or chronic disease hospitals to impose a complete ban on all visitors to such Facilities. This was interpreted by such facilities to include student nurses and consequently, students were not permitted to return to their clinical sites. This was discussed at the BOEN meetings on March 18, 2020 and again on April 15, 2020.

On April 20, 2020, the DPH issued a statement as a follow-up to their prior statement in March, indicating that healthcare facilities and nursing schools have incorrectly interpreted this order as applying to student nurses obtaining clinical hours as part of their course of study. Unfortunately, the release of this statement did not make an impact on our ability to return to clinical rotation.

Following the release of the DPH statement on April 20, 2020, the campus Education Supervisors and Ms. Rodriguez, the Director of Clinical Experience, reached out to all clinical partners to ascertain whether they would be open to accepting students back into their facilities and, to determine the number of active COVID-19 residents and their PPE status.

To date, all facilities with the exception of 1 have stated that they are not accepting students at this time due to having COVID-19 residents and very little PPE. The 1 facility open to considering students, is requiring every faculty member and student be tested for the virus, prior to entering their facility, all must have N-95 masks and, we must provide our own PPE. As part of Porter and Chester's attempt to help the state with the shortage of PPE, it donated the bulk of its PPE from all medical programs to the National Guard and as such, stocks are severely depleted.

We absolutely appreciate the Boards trepidation regarding Virtual Simulation as a replacement for "real life" experience however, in the interests of our "graduates in waiting" and the demand on our profession presently, it would be irresponsible for us not to ask the Board to review their decision on March 2020 as it relates to the Porter and Chester students who have had their graduation put on hold.

The PN students at Porter and Chester are scheduled for a total of 798 clinical hours during their time in the program. Presently, the aforementioned students have anywhere between 32 and 154 hours remaining, to complete the requirement of their program; this equates to between 4 and 19% of their total clinical hours.

You heard from two of our students at the last meeting and we know that others will join the next call. These students have worked long and hard for their achievements to date, putting their lives on hold, taking on student loans to build a career for themselves and to help their families and now, they have to wait due to their inability to complete their program due to the current situation.

Proposal for consideration

Following the decision taken by the Governor regarding social distancing and non-essential business closures, Porter and Chester Institute notified the Board on March 16, 2020 that they had moved temporarily to the online environment for their didactic portions of their programs. Porter and Chester delivers its core curriculum through the Canvas Learning Management System. The Practical Nursing students have access to multiple learning resources such as:

- Nursing Central from Unbound Medical
    - Davis's Drug Guide
    - Taber's Medical Directory
    - Davis's Lab & Diagnostic tests
    - Nurse's Pocket Guide
- ProQuest
- eBrary
- Evolve through Elsevier resources to complement their course text to include:
    - Self-test exams
    - Chapter NCLEX review questions
    - Audio chapter summaries
    - Animations
    - Video
    - Saunders Comprehensive Review for the NCLEX-PN Examination
        - Review for NCLEX-PN examination including quizzlets and a unit approach to covering all aspects of the PN core training outline
- Assessment Technologies Institute (ATI)
    - ATI-A & B PN Comprehensive Predictor exams

It is proposed that Porter and Chester utilize Virtual Clinical Excursions (VCE) through Elsevier Evolve. Students will be provided with a virtual clinical workbook which serves as a guide through a virtual hospital setting, where they can continue to practice communication, documentation, evaluation, and practice safe medication administration. The VCE utilizes multiple information sources (for example, the Electronic Patient Record, patient charts, Kardex, Medication Administration Record, Laboratory Guide, and Drug Guide) that can be examined and evaluated to understand how and why care is implemented in various clinical scenarios. It also presents significant real-world problems that place students in nursing situations where they can set priorities for care, collect data, evaluate and interpret data, prepare and administer medications, and reach conclusions about complex problems. Clinical programs, including medical schools are allowing students to take online courses as a substitute for the required clinical experiences.

The instructor will hold a pre-conference using "Patient Preview" slides to give a brief overview of the assigned lessons.

A post-conference to discuss the lessons, will be facilitated by the use of the "Points to Ponder" slides.

The program has a list of medication errors embedded within the simulation which students are unaware of. As student's complete assignments, they will be expected to print their medication scorecard, showing the medications they administered correctly or incorrectly.

Faculty preparation

All faculty involved in supervising and managing the VCE and, clinical lab evaluations will receive training in the use of VCE from Elsevier and will be evaluated in the clinical lab, using the skills check sheets prior to being assigned to oversee and manage this course.

Lesson Plan

The VCE will take place virtually using the Canvas platform as a repository for course documentation, and will utilize either Zoom or Canvas Conference and will be managed by a member of the PN faculty who will be available for the duration of the assigned session.

The day will be structured in a way to mirror an actual clinical day.

- There will be a maximum student to faculty ratio of 10:1
- There will be a synchronous pre-conference through Zoom or, the Canvas Conference feature, using presentation materials to provide a brief overview of the patient(s) to be cared for. The presentation will enable the instructor to discuss patient care before sending the students into the simulation. The presentation can also act as a launching board for classroom discussion about expectations and preplanning for care.
- Students will be assigned individuals to care for per the lesson assigned and complete all exercises assigned. Examples of exercises are:
    - Video clips of nurse-patient interaction and case study presentation
    - Data collection and prioritization of care
    - Identification of required interventions, contributing to the client's plan of care
    - Review the EMR for admission history, review Physician's orders, review lab reports.
    - Medication administration
    - Vital sign recording

An example of a VCE lesson is attached as exhibit 1.

In addition to VCE, students will be given case studies to complete, along with NCLEX review questions.

It is also proposed that students will attend the campus in small groups (subject to State, CDC and DPH guidance) to work within the clinical lab with the instructor for evaluation of their level II clinical skills, including med-pass.

Evaluation of Learning Outcomes

The Clinical Experience course is based on a pass/fail grade.

Students will be expected to successfully complete their assigned patient lessons with a 90% accuracy in order to achieve a passing grade for the VCE.

Students will be evaluated on their ability to demonstrate competence and safe practice in level II clinical skills required for successful completion of the clinical experience, and simulated scenarios, utilizing the skills check sheets for individual clinical skills. These skills will be evaluated within the school clinical lab.

A final evaluation of student skills will be undertaken within the school clinical lab.

We understand that the Board has had concerns regarding PCI and we are confident that our issues have not related to our curriculum or fundamental program, but rather weaknesses and deficiencies of our instructors on certain of our campuses. We are aggressively working on all areas to improve our clinical performances and outcomes. However, we do not believe that the PCI students should be

punished as a result of our issues, and if the simulation is permissible for some of the PN products, we respectfully request that you allow these students to also complete their coursework the same way as hopefully this is a one-time exception for these students.

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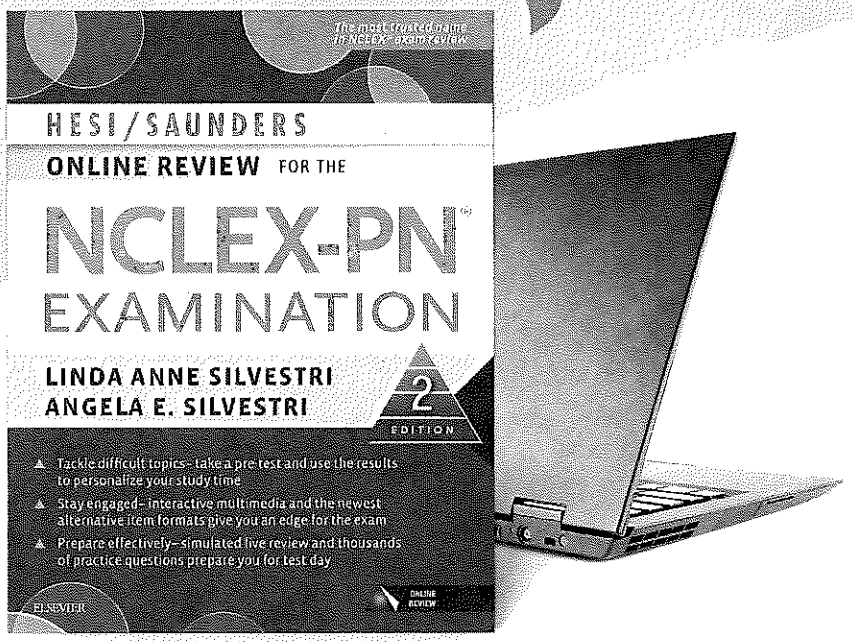

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Linda Anne Silvestri, RN, PhD and Angela Silvestri, RN, PhD

April 2018
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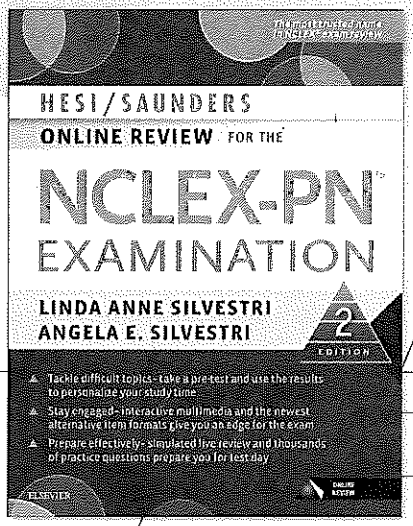

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18-NHPmr-0018 TM/AF 2/18

Lesson 16—Preparation for Drug Administration	Lecture Time	Resources
Objectives: 1. Give the rationale for why a patient is receiving a particular drug. 2. Calculate drug dosages accurately. 3. Identify the nursing implications for drugs a patient is to receive. 4. Describe the correct steps for administration of medications.		
Patients: Harry George, Medical-Surgical Floor, Room 401 Jacquline Catanazaro, Medical-Surgical Floor, Room 402		
Assignments: • Read **Pharmacology and Preparation for Drug Administration** (Chapter 33) and **Administering Oral, Topical, and Inhalant Medications** (Chapter 34) in your textbook. • Read the **Getting Started** section in your workbook and follow along with the guided tours. • Access the charts for Harry George and Jacquline Catanazaro and read the reports/orders. • Complete **Lesson 16—Preparation for Drug Administration** in your workbook. • You may assign the activities that best meet your course teaching/learning objectives.	See workbook for exercise completion times	
Lecture Preparation: Use **Lesson 16 Preview** slides within Canvas to use as an introduction to content and patients that will be covered during this class period.	Before class	Lecture Slides (Preview)
Lecture/Pre-Conference: • Introduce lesson/discuss objectives. • Review patients (discuss **Preview** slides). • Alert students to medication safety focus. • Assign lessons and exercises.	5-10 minutes	Lecture Slides (Preview)
Lecture Notes: You may want to provide your students with the following helpful hints regarding medication safety: • Sometimes there is more to the right route. • You may need to clarify medication orders (*Hint:* dose). • The name band is not the only armband to check. • Be sure to check the medication labels. • IVs count as medications also. • Some medication orders have parameters. • Be on the lookout for new medication orders.		

Lesson 16 Follow-Up	Lecture Time	Resources
Post-conference: Assignment follow-up from previous class period: • What problems, if any, did you have with this assignment? • What questions do you have?	5-10 minutes	Lecture Slides (Points to Ponder)
In-Class Discussion Activities/Questions: • What information must be obtained from the chart before medication administration? • What are the six rights of medication administration? • When are the three checks completed to ensure that these six rights are followed? • What are the specific steps that must be followed for proper medication administration?	15-20 minutes	Lecture Slides (Points to Ponder)
Medication Safety Questions • The following medications are ordered for Jacquline Catanazaro: prednisone, amoxicillin, ziprasidone, ibuprofen, and albuterol. Why is she receiving each of these medications? What is the classification of each of these drugs? • What are some appropriate teaching points that need to be provided to Jacquline Catanazaro when administering her prednisone? • Mini-dose inhalers have specific directions. How would you instruct a patient to use one? • Jacquline Catanazaro is taking amoxicillin. What drugs, if any, does this interact with? • Amoxicillin has GI side effects (among others). What are they? How can they be prevented? • Harry George has an order for IM thiamine. Why was it prescribed? Does he fit the criteria for IM thiamine? • Harry George is receiving gentamicin. Because of this, what random specimen may be ordered? What is the toxic level? • What important nursing implications are involved when a patient is receiving gentamicin?	20-25 minutes	Lecture Slides (Points to Ponder)
Post Review • Patient quiz		

Recommendations based on interviews with education supervisors and consultant review of the program.

Evaluate performance of all clinical instructors

The Education Supervisors will be trained as trainers to work side by side with the clinical instructors (pending covid-19 restriction) to evaluate their teaching ability and adherence to the program, curriculum and learning objectives

Review/Revise the hiring process

MSN preferred

A standardized interview and presentation template will be utilized for purposes of interview and presentation purposes to ensure consistency in the interview process. Examples of inclusion are:

Have the candidate describe how they relate theory to practice to students

Have the candidate relate presentation to NCLEX

Have the candidate give examples of how they would ensure they are student centered

Have the candidate describe their communication skills in dealing with different types of student learning styles

Have the candidate teach a clinical skill as part of their presentation

Create/Revise the orientation process for new hires- create a systematic review process in place

Using a standardized on-boarding outline, newly-hired faculty will receive consistent and objective training to prepare them for their new role. During this training both instructional and clinical training abilities will be evaluated using a pre-determined evaluation format. Following the initial on-boarding training, the follow-up will consist of:

A. Continued evaluation using standardized checklists, a review of classroom and clinical expectations, program content and course objectives. These reviews shall be undertaken:
    a. Weekly X 4
    b. Every 2 wks. X 2
    c. Every Month X 2
    d. Quarterly there after
B. Canvas Orientation, Computer skills orientation
C. Observation of the faculty classroom skills, skills lab, and clinical instructional abilities will be done quarterly using the faculty observation form.

Areas to be evaluated are highlighted below

Classroom Skills

- Knowledge and confidence in delivering the subject matter
- Observation of the course goals and objectives are evident in the content delivery
- Connects well with students and has a collaborative classroom environment
- Evidence of lesson planning and daily objectives
- Integration of NCLEX questions within subject matter is evident

Clinical skills

- Observe their skills
- Complete their checklists and goals
- How they prep for clinical teaching
- Prepare assignments
- Prepare and conduct pre/post conference
- Med pass with students
- How they teach skills at bedside
- How they follow policies and procedures and adhere to standards
- How they teach critical thinking

In addition to the monthly meetings Supervisors hold with their faculty, nursing leadership will hold weekly meetings with supervisors and bi-monthly meetings with all faculty to assess and evaluate status of program and to:

Provide updates of progress of action plans

Promote active listening/Participation

Discuss what's working / What's not
Promote dialogue
Solicit input for solutions to solve problems

Discuss educational issues

- Students
- Instructors

How to improve/goals

Ask for feedback from all

Follow through – advise and support
HR issues
Evaluation of staff
Raise expectations of hires

Re-evaluate staff for hrs. Worked to match needs of program
Skills, experience, expertise, scope of practice

Utilize the materials and Competency Checklists created for Observation, Mentoring and Evaluation of Faculty in the Field –see attached

The following will be used as an outline to guide the evaluation process.
Faculty Classroom Evaluation outline
Faculty Clinical Skills Evaluation outline
Clinical Site Faculty Evaluation outline

Competence and observation will be evaluated using standardized checklists.

Faculty Observation outline - Classroom Lecture and Skills Lab Classroom

The following will be observed and evaluated, utilizing a standardized evaluation form.

Classroom:

Evaluation of instructor preparedness for class

Mastery of content, disease states and skills being taught

Demonstrates knowledge and addresses policies and procedures and standards related to content and skills being reviewed and demonstrated

Discusses rationale of content and importance to patient care, stresses nursing standards and LPN scope of practice

Discusses student objectives for the course/lab being taught

Adheres to goals and objectives and content of course/lab

Reviews the NCLEX questions related to course content, explains the rationale of the answers for the students

Is respectful to students with communication and prompts student participation

Translates material taught to the bedside experience

Discusses the following class outline and clinical rotation if appropriate

Skills Lab Instruction:

Reviews skills and relevance to patient care

Reviews all standards and policies supporting the skills and stresses adherence to the standards and practice for patient safety

Faculty demonstrates skills with expertise, following guidelines for procedures answering questions

Preps students for skill demonstration

Student performs skills following procedure review

Instructor evaluates and supports the students during the procedure process

Faculty evaluates the students and provides written documentation of the experience

Faculty reviews student reflection of the process and experience

Faculty Observation outline - Clinical

The following will be observed and evaluated, utilizing a standardized evaluation form.

Evaluations will be conducted 4 Times a year or as required – by the Director of Clinical Experience/education supervisor/ peer faculty

Criteria for performance observation in clinical setting

Prior to clinical assignment, faculty has completed all competencies for clinical skills applicable to clinical site rotation

Faculty member reviews clinical facility policies and procedures at the clinical site

Faculty member observes and evaluates instructor preparedness for patient selection and student assignments

Discussed goals and objectives for the rotation (to evaluate at end of shift)

Observe teaching students
- Held preconference
- Engaged students @ topics of their patients
- Was present with the staff while performing skills
- Interacting with the students
  - During Med Pass
  - Discussing Diagnosis
  - Observed students adhering to all standards for patient care
  - Discussed rationale for care plan

Provide written evaluation of student experience, shared with student
- What went well?
- Areas for improvement
- Opportunities for growth

Observed post conference and wrap up-
- Discussed some NCLEX questions from the course work
- Students were engaged –

Porter and Chester Institute - Response to NCLEX Pass rates

In response to its 2018-2019 NCLEX exam reports, Porter and Chester Institute introduced the Health Education Systems Incorporated (HESI) two-day Live Review course into its Seminar course in September 2020 in an effort to address suboptimal NCLEX pass rates for certain of its locations The first group of students/graduates to demonstrate improvement from this program is the October, 2019 PCI graduating class.

The two-day Live Review course was offered to the October 2019 and January 2020 graduating classes. Based upon the data for those graduates who have taken their licensure exam, 82.1% (87 of 106) of Porter and Chester students taking the exam for the first time had successfully passed the NCLEX-PN exam. It was also noted, that the students who attended the Live review, scheduled and sat for their NCLEX-PN sooner than the prior graduates thus leading to a positive influence on the first-time NCLEX pass rates.

For the graduating cohorts from 1/2019, 4/2019, & 7/2019, there were 104 first-time testers with an average time to first test attempt of 87.42 days - Ranges 21 – 393 days.

There were several students in the high 200 and mid and upper 300 days. The graduation dates were verified that they did not appear on the 2018-2019 results list.

For the graduating cohorts from 10/2019 & 1/2020 who attended the HESI live-review, there were 96 first-time testers with an average time to first test attempt of 58.03 days.

Presently, the PearsonVue and state NCLEX-PN examination fees are not included within the student service fees which potentially can cause a delay in the graduate applying for the licensure exam and having a direct impact on the momentum and motivation of the graduate. Porter and Chester Institute will now include the cost of the PearsonVue application and the state NCLEX-PN license fee within their student services fee, thus eliminating the delay between program completion and the licensure application submission. The change will take effect from July 2020 for all new student enrollments.

Live Review evaluation and continuing implementation

Based upon the results, we are of the opinion that the introduction of the Live Review course has improved the first-time pass rates for our student graduates.

To achieve minimum numbers determined by Elsevier, cohorts from multiple campuses were combined as were students from day and evening groups.

Porter and Chester Institute has reviewed the online review from both Elsevier and ATI. The ATI review has less flexibility in its availability as it is only available to students for 12 weeks with the option for the student to purchase additional 12 week periods. The Elsevier HESI / Saunders Online Review for the NCLEX-PN® has more flexibility for the student and offers access to over 2,500 practice questions, ten interactive review modules with HESI Live Review videos, 50 content lessons, practice exams, and test-taking strategies and will be available to the student after graduation.

Similar to its Live Review counterpart, the HESI / Saunders Online Review will provide our PN students a modular approach to learning with a focus on the NCLEX test plan and successful first-time completion of licensure exams. The lessons contained within the ten modules have been integrated into our Seminar course and curriculum. A brochure outlining the overview of the course has been provided to Ms. Smith.

To better serve our students, we will continue with the 2-day Live Review course however, we will switch to the virtual live review. This will be facilitated by Elsevier and will contain all the elements that the in-person Live Review contained. In short, this will give students access to two different versions of the review course.

Porter and Chester Institute will continue to monitor student NCLEX test outcome data to determine correlation between the HESI online review course and first-time pass rates on the NCLEX-PN exam.

PORTER AND CHESTER INSTITUTE
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HESI Review Results

Campus		Day			Evening		
		Attended HESI Review	NCLEX pass	Pass Percentage	Attended HESI Review	NCLEX pass	Pass Percentage
Enfield	Oct-19	8	8	100%	2	2	100%
	Jan-20	2	2	100%	3	3	100%
Hamden	Oct-19	11	9	82%	4	2	50%
	Jan-20	10	5	50%	no cohort	no cohort	N/A
Rocky Hill	Oct-19	7	6	86%	6	3	50%
	Jan-20	3	2	67%	no cohort	no cohort	N/A
Stratford	Oct-19	no cohort	no cohort	N/A	5	3	60%
	Jan-20	6	6	100%	no cohort	no cohort	N/A
Waterbury	Oct-19	10	8	80%	9	9	100%
	Jan-20	14	13	93%	6	6	100%

Oct 19 HESI Review	62 attended	81% NCLEX first attempt pass
Jan 20 HESI Review	44 attended	84% NCLEX first attempt pass

PHONE CALLS/SCOPE OF PRACTICE QUESTIONS
SUMMARY – MONTH: April 2020 (27 calls)

Answered with or without written documents

APRNs 10 calls:

- 5-Request a copy of the APRN scope of practice. *Refer to the Board of Examiners for Nursing (BOEN) website and the Connecticut (CT) Nurse Practice Act (NPA).*
- Request information on collaborative practice agreements. *Refer to the Department website, Practitioner Licensing and APRN Collaborative Practice Agreements.*
- 4-Can an APRN certified in one practice area, practice in a "new" area with education, verification of competency and a collaborative practice agreement with a CT licensed physician in the "new" practice area? *Yes.*

RNs 10 calls:

- 4-Request a copy of the RN scope of practice. *Refer to the BOEN website and the CT NPA.*
- 3-Request an update on RN renewal application. *Refer to the Department's licensing unit.*
- RN student asking about the accreditation of an RN school, what is ACEN? *Provided information about the Accreditation Commission for Education in Nursing (ACEN), may want to search for their website and/or discuss this with the school program.*
- Can a Graduate Nurse (from a RN program) work as a Licensed Practical Nurse? *No, may want to review the graduate nurse role on the Department website, Practitioner Licensing, Registered Nurse and Graduate Nurse.*
- Request a list of the RN programs in CT. *Refer to the BOEN website, Nursing Education Programs and RN Programs.*

LPNs 3 calls:

- 2-Request a copy of the LPN scope of practice. *Refer to the BOEN website and the CT NPA.*
- LPN graduate had applied for licensure (more than 5 years ago) but never took NCLEX-PN. Does she need to reapply for a license? *Refer to the Department's licensing unit.*

Schools 2 calls:

- Ohio State University: Does the BOEN or the Department have oversight of post-licensure nursing programs? *No.*
- Messiah College, PA: Does the BOEN or the Department have oversight of post-licensure nursing programs? *No.*

Guidelines/Other 2 calls:

- Vermont Board of Nursing: Request information about current clinical experiences for students in a Practical Nursing program located in CT (at Stone Academy). *Refer caller to the Program Director of Stone Academy.*
- Request information about an application for a Home Healthcare Agency. *Refer to the Facility Licensure staff.*

STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING

Renee Cottrill, L.P.N. Petition No. 2019-896
License No. 039663

MEMORANDUM OF DECISION

I

Procedural Background

On October 7, 2019, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board"). Board ("Bd.") Exhibit ("Ex.") 3. On October 16, 2019, the Department filed a Motion for Summary Suspension ("Motion") with the Board. Bd. Ex. 1. The Charges allege violations of Chapter 378 of the General Statutes of Connecticut ("Conn. Gen. Stat.") by Renee Cottrill ("Respondent") which would subject Respondent's licensed practical nurse ("L.P.N.") license to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

Based on the allegations in the Charges, the Board found that Respondent's continued nursing practice presented a clear and immediate danger to public health and safety. Accordingly, on October 16, 2019, the Board ordered, pursuant to Conn. Gen. Stat. § 4- 182(c) and § 19a-17(c), that Respondent's L.P.N. license be summarily suspended pending a final determination by the Board of the allegations contained in the Charges ("Summary Suspension Order.") Bd. Ex. 1.

On October 16, 2019, the Department mailed the Summary Suspension Order, Charges, and Notice of Hearing ("Notice") by first class mail to Respondent's address of record, 30 Cote Lane, Portland, CT, and to her email address at crabb300@gmail.com. Bd. Ex. 2. The Notice indicated that a hearing was set for November 20, 2019.

On October 23, 2019, a State Marshal served Respondent personally with the Summary Suspension Order, Notice, and Charges at a different address, 7 Grove Street, Apartment B, Portland, CT 06480. Bd. Ex. 4.

On November 20, 2019, the hearing was held. Respondent was not present at the hearing and was not represented by an attorney. Tr. p. 2. Attorney Leslie Scoville represented the Department. *Id.*

Respondent did not file an Answer to the Charges within 14 days of her receipt of the Notice. Due to Respondent's failure to file a timely Answer to the Charges, Attorney Scoville orally moved on the record to deem the allegations admitted ("Motion to Deem"). Tr. p. 5. Based on the evidence in the record demonstrating that Respondent had been personally served by a State Marshal with the Notice, Summary Suspension Order, and Charges, the Board determined that Respondent was properly served and had sufficient notice of the hearing. Based on this evidence, the Board granted Attorney Scoville's Motion to Deem. *Id*.

Following the close of the record, the Board conducted fact finding.

Each member of the Board involved in this decision attests that he or she was present at the hearing or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services,* 228 Conn. 651 (1994).

II

Allegations

Count One

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Portland, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 039663. Bd. Ex. 3.

2. In paragraph 2 of the Charges, the Department alleges that on June 19, 2019, the Board ordered a Consent Order in Petition No. 2019-370 that placed Respondent's license on probation for four years. Such disciplinary action was based on proof of Respondent's abuse and/or utilization of marijuana, benzodiazepines and/or alcohol to excess. Bd. Ex. 3.

3. In paragraph 3 of the Charges, the Department alleges that said Consent Order specifically provided that Respondent shall engage in therapy and counseling with a Connecticut licensed therapist for the entire probationary period. Bd. Ex. 3.

4. In paragraph 4 of the Charges, the Department alleges Respondent has failed to provide evidence that she engaged in therapy and counseling with a Connecticut licensed therapist.

5. In paragraph 5 of the Charges, the Department alleges that Respondent's conduct as described above constitutes violations of the terms of probation as set forth in the Consent Order, and subjects Respondent's license to revocation or other disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

Count Two

6. In paragraph 6 of the Charges, the Department alleges that paragraphs 1 and 2 are incorporated herein by reference as if set forth in full.

7. In paragraph 7 of the Charges, the Department alleges that said Consent Order specifically provides that Respondent shall submit to observed, random urine screens for drugs and alcohol.

8. In paragraph 8 of the Charges, the Department alleges that Respondent has failed to provide evidence that she participated in random weekly urine drug testing screens.

9. In paragraph 9 of the Charges, the Department alleges that Respondent's conduct as described above constitutes violations of the terms of probation as set forth in the Consent Order, and subjects Respondent's license to revocation or other disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

Count Three

10. In paragraph 10 of the Charges, the Department alleges that paragraphs 1 and 2 are incorporated herein by reference as if set forth in full.

11. In paragraph 11 of the Charges, the Department alleges that on one or more occasions during approximately July 2019 through approximately August 2019, Respondent abused and/or utilized alcohol, methadone and/or buprenorphine to excess.

12. In paragraph 12 of the Charges, the Department alleges that Respondent's conduct as described above constitutes violations of the terms of probation as set forth in the Consent Order, and subjects Respondent's license to revocation or other disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

III

Findings of Fact

1. Respondent, of Portland, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 039663. Bd. Ex. 3.

2. On June 19, 2019, the Board issued a Consent Order in Petition No. 2019-896 that placed Respondent's license on probation for four years. Such disciplinary action was ordered by the Board based upon proof of Respondent's abuse and/or utilization of marijuana, benzodiazepines and/or alcohol to excess. Bd. Ex. 3.

3. Said Consent Order specifically provided that Respondent shall engage in therapy and counseling with a Connecticut licensed therapist for the entire probationary period. The Consent Order also provided that Respondent submit to observed, random urine screens for drugs and alcohol. Bd. Ex. 3.

4. Respondent has failed to provide evidence that she has engaged in therapy and counseling with a Connecticut licensed therapist.

5. Respondent has failed to provide evidence that she has participated in random weekly urine drug testing screens.

6. On one or more occasions during approximately July 2019 through approximately August 2019, Respondent abused and/or utilized alcohol, methadone and/or buprenorphine to excess.

7. On October 16, 2019, the Department mailed the Summary Suspension Order, Charges, and Notice by first class mail to Respondent's address of record, 30 Cote Lane, Portland, CT, and to her email address at crabb300@gmail.com. Bd. Ex. 2.

8. On October 23, 2019, a State Marshal served Respondent personally with the Summary Suspension Order, Notice, and Charges at a different address, 7 Grove Street, Apartment B, Portland, CT 06480. Bd. Ex. 4.

9. The Department provided Respondent with reasonable and adequate written notice of the hearing and the allegations contained in the Charges. Tr. p. 5.

10. Respondent failed to appear for the hearing and did not request a continuance. Tr. p. 5.

11. The factual allegations contained in the Charges are deemed admitted and true. Tr. pp. 5-6.

IV

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727, 739-740 (2013). The Department sustained its burden of proof regarding all of the allegations contained in the Charges.

Conn. Gen. Stat. § 20-99 (a) provides, in pertinent part,

> The Board … shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons

> licensed to practice nursing. After holding a hearing . . . said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17. . .

Conn. Gen. Stat. § 20-99(b) sets forth specific conduct which fails to conform to the accepted standards of the nursing profession and also establishes that nonconforming conduct is not limited to the behavior identified in that subsection. Under Conn. Gen. Stat. § 19a-17(a), the Board is authorized to impose discipline on a license upon the finding of good cause.

Since Respondent did not file an Answer to the Charges, the allegations are deemed admitted and true. *See,* Conn. State Agencies § 19a-9-20. The record establishes that on June 19, 2019, the Board issued a Consent Order in Petition No. 2019-896 that placed Respondent's license on probation for four years. Such disciplinary action was based on proof of Respondent's abuse and/or utilization of marijuana, benzodiazepines and/or alcohol to excess. FF 2.

Said Consent Order specifically provided that Respondent shall engage in therapy and counseling with a Connecticut licensed therapist for the entire probationary period and submit to observed, random urine screens which were required to be negative for the presence of alcohol and drugs. FF 3. To date, Respondent has failed to provide evidence that she has engaged in therapy and counseling with a Connecticut licensed therapist. FF 4. Respondent also has failed to provide evidence that she has participated in random weekly urine drug testing screens. FF 5. Furthermore, on one or more occasions during approximately July 2019 through approximately August 2019, Respondent abused and/or utilized alcohol, methadone and/or buprenorphine to excess. FF 6.

Based on Respondent's noncompliance with the terms of the June 19, 2019 Consent Order, the Board finds that such violations constitute good cause for the Board to discipline her license.

Therefore, the Board concludes that Respondent's above-described conduct, as deemed to be admitted and true, constitutes grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 20-99(b) and 19a-17.[1] Based on the totality of the evidence, the Board deems revocation of Respondent's license to be the appropriate remedy.

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[1] Pursuant to Conn. Gen. Stat. § 19a-17, the Board may impose disciplinary action, as set forth in the Statute, upon finding the existence of good cause.

V

Order

Based on the record in this case, the above findings of fact and conclusions of law, the Board hereby orders that Renee Cottrill's license number 039663 to practice as a licensed practical nurse is hereby revoked.

This Order is effective on the date it is signed by the Board.

The Board hereby informs Respondent, Renee Cottrill, and the Department of this Decision.

Dated at Hartford, Connecticut this day of May, 2020.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair

STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING

Melissa Eccles, L.P.N. Petition No. 2018-123
License No. 036587

MEMORANDUM OF DECISION

I

Procedural Background

On October 4, 2019, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board"). Board ("Bd.") Exhibit ("Ex.") 1. The Charges allege that Melissa Eccles' ("Respondent") violations of Chapter 378 of the General Statutes of Connecticut ("Conn. Gen. Stat.") subject Respondent's licensed practical nurse ("L.P.N.") license to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b)(2).

On October 16, 2019, the Department filed a Motion for Summary Suspension Order ("Summary Suspension Order") with the Board. Bd. Ex. 3. Based on the allegations in the Charges, the Board found that Respondent's continued nursing practice presented a clear and immediate danger to public health and safety. Accordingly, on that date, pursuant to Conn. Gen. Stat. §§ 4-182(c) and 19a-17(c), the Board ordered that Respondent's L.P.N. license be summarily suspended pending a final determination by the Board of the allegations contained in the Charges. Bd. Ex. 1.

On October 16, 2019, the Department mailed the Charges, Notice of Hearing ("Notice"), and Summary Suspension Order by certified and first-class mail to Respondent's address of record, 3 Sachem Terrace. Apt. 1, Norwich, CT 06360, and by email to Respondent's email address, cjeccles@hotmail.com. Bd. Ex. 2. On that same date, the Department mailed the Charges, Notice, and Summary Suspension Order to a State Marshal for service to Respondent at her address of record, 3 Sachem Terrace, Apt. 1, Norwich, CT 06360. *Id*. On October 29, 2019, the State Marshal served Respondent at 3 Sachem Terrace, Apt. 1, Norwich, CT 06360. *Id.* The Notice informed Respondent that a hearing was scheduled for November 20, 2019. *Id*.

On October 24, 2019, Respondent filed her Answer to the Charges. Bd. Ex. 4.

On November 20, 2019, the Board convened the hearing. Respondent was present at the hearing and was self-represented. Tr. p. 2. Attorney Linda Fazzina represented the Department. Transcript ("Tr.") 11/20/19, p. 2.

On November 20, 2019, the Board voted that the Summary Suspension of Respondent's L.P.N. license remain in effect until such time as Respondent submits to a substance abuse evaluation performed by a licensed psychiatrist. Tr. 11/20/19, pp. 35-37. In addition, the Board ordered Respondent to submit to an observed random chain of custody urine screen for alcohol and drugs. *Id*. The Board set a deadline of December 23, 2019 for Respondent to submit the results of the evaluation and urine screen to the Department. Bd. Ex. 5.

On December 24, 2019, the Department filed a Motion to Supplement the Administrative Record. Tr. 1/15/2020, pp. 4-5. The Department's Motion to Supplement the Administrative Record sought to introduce into evidence the pleadings, motions, judgment, post-judgement motions, and post-judgment rulings in *Commissioner of the Department of Public Health v. Melissa Eccles* (Connecticut Superior Court, Judicial District of Hartford, Docket No. HHD-CV-19-6108255-S)[1]. Among the Court's rulings that the Department sought to introduce into

[1] On March 6, 2019, the Commissioner of the Department of Public Health ("Commissioner") filed a complaint against Respondent. The complaint alleged that in February 2018, the Department initiated an investigation of Respondent. The investigation was initiated pursuant to Conn. Gen. Stat. § 19a-14(a)(10), a statute authorizing the Commissioner to conduct "any necessary review, inspection or investigation regarding … possible violations of statutes or regulations, and disciplinary matters" by nurses. The complaint alleged that information resulting from the investigation was presented to the Commissioner, and on June 26, 2018, the Commissioner issued an order pursuant to Conn. Gen. Stat. §§ 19a-14(a)(10) and 20-99(b) requiring Respondent, at her own expense, to submit to a substance abuse evaluation to evaluate her substance use and her ability to practice safely as a licensed practical nurse. The complaint alleged that Respondent was served with the Commissioner's Order on July 6, 2018 and had failed to comply with the Commissioner's Order. The complaint sought an order by the Court enforcing the Order of the Commissioner. On July 24, 2019, the Court, (Gorden, J.) issued an order (Judgement Without Trial) that the Respondent comply with the Commissioner's Order and undergo a substance abuse evaluation by September 12, 2019.

On October 1, 2019, the Department filed a Motion for Contempt alleging that Respondent was in direct violation of the Court's July 24, 2019 order to submit to a substance abuse evaluation by September 12, 2019. The Department sought a finding that Respondent was in willful contempt of the Court's order and requested the Court to take all necessary actions to compel compliance with the Court's order. Three days later, on October 4, 2019, the Department filed the Statement of Charges at issue in this Memorandum of Decision.

On November 4, 2019, the Court held a hearing on the contempt motion. Following oral argument by the parties, the Court, (Budzik, J.) ordered Respondent to submit to a substance abuse evaluation by November 18, 2019. On November 25, 2019, the Department filed a Notice Of The Defendant's Failure To Comply With Court Order ("Notice of Failure to Comply"). The Notice of Failure to Comply informed the Court that as of November 25, 2019, Respondent had not submitted to a substance abuse evaluation in violation of the Court's order to do so by November 18, 2019. On December 12, 2019, the Court (Budzik, J.), granted the Department's Motion for Contempt, finding Respondent in willful violation of the Court's order to submit to a substance abuse evaluation.

evidence was the Court's (Budzik, J.) December 12, 2019 ruling finding Respondent in willful contempt of a clear and unambiguous court order to submit to a substance abuse evaluation.

Respondent did not submit a substance abuse evaluation report or the results of a urine screen to the Board by the December 23, 2019 deadline.

On December 31, 2019, Respondent's therapist filed a one-page urine screen report dated December 23, 2019. The report indicated that Respondent's urine screen results were negative for any controlled substances. Bd. Ex. 7.

On January 13, 2020, Respondent's therapist filed a three-page substance abuse evaluation report. Respondent's therapist recommended that Respondent's L.P.N. license be reinstated without any restrictions. Bd. Ex. 8 (under seal).

On January 15, 2020, the Board reconvened the hearing to take up the Department's Motion to Supplement the Administrative Record, review Respondent's late-filed documents, and hear additional testimony from Respondent concerning those documents. Tr. 1/15/2020, pp. 3-5. Respondent was present at the hearing but was not represented by counsel. Attorney Fazzina represented the Department. Tr. 1/15/2020, p.3.

At the hearing, the Board took up the Department's Motion to Supplement the Administrative Record. Attorney Fazzina argued the motion, explaining the underlying civil Superior Court action and resultant judicial rulings that formed the basis of the motion, as well as the timing of the motion's filing. Tr. 1/15/2020, pp. 4-5. The Board considered the motion and reviewed the attached exhibits. [2]. Tr. 1/15/2020, p. 3.

The Board unanimously granted the Department's Motion to Supplement the Administrative Record and admitted the documents attached to the Motion as full exhibits. Bd. Ex. 6; Tr. 1/15/2020, p. 11-12.

In addition, the Board entered the urine screen report, marked as Bd. Ex. 7, and the substance abuse evaluation report, marked as Bd. Ex. 8 (under seal), into the record as full exhibits. Tr. 1/15/2020, pp. 28-30, 33.

Following the close of the record, the Board conducted fact finding.

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[2] The documents attached to the Department's Motion to Supplement the Administrative Record all derived from *Commissioner of the Department of Public Health v. Melissa Eccles* (Connecticut Superior Court, Judicial District of Hartford, Docket No. HHD-CV-19-6108255-S). They included the Court's (Gordon, J.) July 24, 2019 order to Respondent to submit to a substance abuse evaluation, the Department's October 1, 2019 Motion for Contempt, the Department's November 25, 2019 Notice of Failure to Comply, and the Court's December 12, 2019 order finding Respondent in contempt of the Court's order to submit to a substance abuse evaluation.

Each member of the Board involved in this decision attests that he or she was present at the hearing or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services,* 228 Conn. 651 (1994).

II

Allegations

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Norwich, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 036587.

2. In paragraph 2 of the Charges, the Department alleges that on or about June 26, 2018, the Commissioner of the Department issued an Order that required Respondent to undergo a substance abuse evaluation to evaluate her substance use and whether any such use would impair her ability to practice safely as a L.P.N. ("the Commissioner's Order"). The Commissioner's Order provided that the initial examination date was to be on or before July 27, 2018.

3. In paragraph 3 of the Charges, the Department alleges that Respondent has failed to comply with the Commissioner's Order.

4. In paragraph 4 of the Charges, the Department alleges that on or about July 24, 2019, the Honorable Judge Gordon issued an order in *Connecticut Superior Court, Judicial District of Hartford, Commissioner of the Department of Public Health v. Melissa Eccles, L.P.N.,* Docket No. HHD-CV-19-6108255-S, that Melissa Eccles, L.P.N. comply with the Commissioner's Order in its entirety and undergo the referenced substance abuse evaluation to evaluate her for substance use and her ability to practice safely as a L.P.N. by September 12, 2019 ("the Superior Court Order").

5. In paragraph 5 of the Charges, the Department alleges that Respondent has failed to comply with the Superior Court Order.

6. In paragraph 6 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 20-99, including but not limited to 20-99(b)(2), and/or pursuant to Conn. Gen. Stat. §§ 19a-17, including, but not limited to 19a-17(a).

III

Findings of Fact

1. Respondent of Norwich, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 036587. Bd. Ex. 4.

2. On June 26, 2018, the Commissioner of the Department issued an Order that required Respondent to undergo a substance abuse evaluation to evaluate her substance use and to determine whether any such use would impair her ability to practice safely as a L.P.N. ("the Commissioner's Order"). The Commissioner's Order provided that the initial examination date was to be on or before July 27, 2018. Bd. Ex. 4; Dept. Ex. 1, pp. 8-9.

3. Respondent failed to comply with the Commissioner's Order. Dept. Ex. 1, pp. 5, 25.

4. On March 6, 2019, in response to Respondent's failure to comply with the Commissioner's Order, the Commissioner filed a complaint against Respondent in Superior Court. The complaint sought an order by the Court enforcing the Order of the Commissioner.

5. On or about July 24, 2019, the Court (Gordon, J.) issued an order in *Commissioner of the Department of Public Health v. Melissa Eccles*, Docket No. HHD-CV-19-6108255-S, requiring Melissa Eccles, L.P.N. to comply with the Commissioner's Order in its entirety and undergo the referenced substance abuse evaluation to evaluate her for substance use and her ability to practice safely as a L.P.N. by September 12, 2019 ("the Superior Court Order"). Bd. Ex. 6, pp. D1-D2, D5, E5; Dept. Ex. 1, p. 25.

6. On October 1, 2019, the Department filed a Motion for Contempt in *Commissioner of the Department of Public Health v. Melissa Eccles*, Docket No. HHD-CV-19-6108255-S. The motion alleged that Melissa Eccles was in direct violation of the Court's order requiring Respondent tot comply with the Commissioner's Order in its entirety and undergo a substance abuse evaluation to evaluate her for substance abuse and her ability to practice safely as a L.P.N. Bd. Ex. 6, pp. E1-E3.

7. On November 4, 2019, the Court (Budzik, J.) held a hearing on the Department's Motion for Contempt. Following argument by the parties, the Court, (Budzik, J.) ordered Respondent to submit to a substance abuse evaluation by November 18, 2019.

8. On November 25, 2019, the Department filed a Notice of the Defendant's Failure to Comply with Court Order in *Commissioner of the Department of Public Health v. Melissa Eccles.*, Docket No. HHD-CV-19-6108255-S. The Notice of Failure to Comply informed the Court that as of November 25, 2019, Respondent had not submitted to a substance abuse evaluation in violation of the Court's order to do so by November 18, 2019. Bd. Ex. 6, pp. D1-D3.

9. On December 12, 2019, the Court (Budzik, J.), granted the Department's Motion for Contempt, finding Respondent in willful violation of the Court's order to submit to a substance abuse evaluation. Court (Budzik, J.) Bd. Ex. 6, p. E6.

8. Respondent failed to comply with the Superior Court Orders, dated July 24, 2019, and November 4, 2019. Dept. Ex. 1, p. 6.

IV

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727, 739-740 (2013). The Department sustained its burden of proof with regard to all of the allegations contained in the Charges.

Conn. Gen. Stat. § 20-99 provides in pertinent part:

> (a) The Board … shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons licensed to practice nursing. After holding a hearing … said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17….
> (b) Conduct which fails to conform to the accepted standards of the nursing profession includes, but is not limited to, the following: … (2) illegal conduct, incompetence or negligence in carrying out usual nursing functions; …

Respondent admitted to the allegations contained in paragraphs 1, 2 and 4 of the Charges, and initially denied the allegations contained in paragraphs 3, 5 and 6 of the Charges. Bd. Ex. 4. However, over the course of the hearing, Respondent admitted to all of the alleged conduct. The Board finds that the Department sustained its burden of proof with respect to all of the allegations contained in the Charges. Findings of Fact ("FF") 1-8.

The record establishes that on June 26, 2018, the Commissioner issued an Order requiring Respondent to undergo a substance abuse evaluation to evaluate her substance use and determine whether any such use would impair her ability to practice safely as a L.P.N. ("the Commissioner's Order"). The Commissioner's Order provided that the initial substance abuse evaluation date was to be on or before July 27, 2018. FF 2. The Department sufficiently established that Respondent failed to comply with the Commissioner's Order, as the record is devoid of any evidence demonstrating compliance. FF 3.

On July 24, 2019, the Court (Gordon, J.) issued an order in *Commissioner of the Department of Public Health v. Melissa Eccles*,Docket No. HHD-CV-19-6108255-S, requiring Melissa Eccles, L.P.N. to comply with the Commissioner's Order in its entirety and undergo the referenced substance abuse evaluation to evaluate her for substance use and her ability to practice safely as an L.P.N. by September 12, 2019 ("the Superior Court Order"). FF 4. The

Department sufficiently established that Respondent failed to comply with the Superior Court Order, as the record is devoid of any evidence demonstrating compliance. FF 5-8.

At the November 20, 2019 hearing, Respondent testified that she was not aware that her L.P.N. license had been summarily suspended on October 16, 2019 until her director of nursing informed her of the suspension. Tr. 11/20/19, p. 8. Respondent denied ever having a history of substance abuse and testified that although she was ordered to undergo a substance abuse evaluation on June 26, 2018, a lack of funds to pay for the evaluation prevented her from complying with the order. Respondent testified that she would have undergone the evaluation if she had had the funds to pay for it. Tr. 11/20/19, pp. 10, 19-20.

In her defense, Respondent testified that her insurance carrier will no longer cover any of her medical expenses due to an issue with purportedly fraudulent insurance claims. Tr. 11/20/19, pp. 27-28. As a result of her insurance carrier's ongoing fraudulent claims investigation, Respondent has no insurance coverage for herself or her children. *Id.* She also testified that any other recommended providers who specialize in substance abuse evaluations require cash payments. Tr. 11/20/19, p. 31. Respondent's defense is not sufficient to overcome the preponderance of the evidence establishing that Respondent failed to comply with the Commissioner's Order and the Superior Court Order.

Respondent has taken more than two years to comply with the Commissioner's June 26, 2018 Order (Dept. Ex. 1, pp. 4-6, 8, 11-12 (under seal), pp. 21-22, 23-24 (under seal), 25). Respondent testified that in 2018, she did not understand the consequences of not obtaining the substance abuse evaluation and only fully grasped the importance of complying with the Commissioner's Order when her L.P.N. license was summarily suspended. Tr. 11/20/19, p. 8. However, Respondent testified that she is willing to do whatever it takes to go back to work and get her life back. Tr. 11/20/19, p. 26.

Ultimately, Respondent accepted full responsibility for her lack of compliance with the Department's numerous substance abuse evaluation requests, dating back to February 2018. Dept. Ex. 1, pp. 3, 6 (under seal); Tr. 11/20/19, pp. 10, 17-18, 20, 31-32.

The record is devoid of any evidence that Respondent has any impairments which would affect her ability to practice safely as a L.P.N.

Based on the foregoing, the Board finds that the Department has established by a preponderance of the evidence that the conduct admitted, in conjunction with the Department's

sustaining its burden of proof, renders Respondent's license subject to sanctions, including among others, revocation, suspension or probation. *See*, Conn. Gen. Stat. §§ 19a-17(a)(1), (2) and (5).

V

Order

Based on the record in this case, the above findings of fact and conclusions of law, the Board hereby orders, with respect to Respondent's license number 036587, as follows:

1. Respondent's license number 036587 to practice as a licensed practical nurse in the State of Connecticut is hereby reprimanded.
2. Respondent's license shall remain under suspension until Respondent submits to an observed, random, chain of custody urine screening at a testing facility approved by the Department. The suspension will be vacated after the Department receives a urine screening report that is negative for all controlled substances.
3. Concurrently, Respondent's license shall be placed on probation for a period of six months under the following terms and conditions. If any of the conditions of probation are not met, Respondent's licensed practical nurse license may be subject to disciplinary action pursuant to Conn. Gen. Stat. § 19a-17.
   A. Observed random urine screens
      (1) At her expense, Respondent shall be responsible for submitting to observed, random, chain of custody urine screens for alcohol and drugs for the entire probationary period, at a testing facility approved by the Department. Random alcohol/drug screens shall be legally defensible in that specimen donor and chain of custody can be identified throughout the screening process.
      (2) Respondent shall be responsible for notifying the laboratory, her therapist, the Department, and her prescribing practitioner of any drug(s) she is taking. For any prescription of a controlled substance(s) for more than two consecutive weeks, Respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department

until such time as the controlled substance(s) are no longer prescribed. The reports shall include the following:

a. A list of controlled substances prescribed by this provider;
b. A list of controlled substance(s) prescribed by other providers;
c. An evaluation of Respondent's need for the controlled substance; and
d. An assessment of Respondent's continued need for the controlled substance(s).

(3) There must be at least one such observed, random alcohol/drug screen within the probationary period.

(4) Random alcohol/drug screens shall be negative for the presence of alcohol and drugs, excluding the drugs that Respondent's providers prescribe. All urine screens for alcohol will be tested for Ethyl Glucuronide (EtG) and Ethyl Sulfate (EtS) metabolites. All positive screen results shall be confirmed by the Gas Chromatograph Mass Spectrometer (GC/MS) testing method. Chain of custody documentation must accompany all laboratory reports and/or the laboratory reports must indicate that chain of custody procedures have been followed.

(5) Random alcohol/drug screens must include testing for the following substances:

Amphetamines	Methadone
Barbiturates	Methaqualone
Benzodiazepines	Opiates (Metabolites)
Cannabinoids (THC Metabolites)	Phencyclidine (PCP)
Cocaine	Propoxyphene
Meperidine (Demerol)	Ethanol (alcohol)
Fentanyl	Stadol
Tramadol	

(6) Laboratory reports of random alcohol and drug screens shall be submitted directly to the Department at the address cited in Paragraph G below by Respondent's therapist, personal physician, or the testing laboratory.

B. Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate purpose, by a licensed health care practitioner authorized to prescribe medications. Respondent shall not abuse and/or excessively use any drugs that are prescribed for a legitimate medical purpose.

C. Respondent is hereby advised that the ingestion of poppy seeds may produce a positive drug screen result indicating the presence of opiates/morphine. The ingestion of mouthwash, over the counter cough suppressants and cold/flu remedies may produce a positive result indicating the presence of alcohol. For that reason, any food substance containing poppy seeds, mouthwash and over the counter cough suppressants and cold/flu remedies should be avoided during the probationary period. In the event that a drug/alcohol screen is positive for opiates/morphine and/or alcohol, the ingestion of poppy seeds, mouthwash and over the counter cough suppressants and/or cold/flu remedies shall not constitute a defense to such positive screen.

D. Within the six-month probationary period, Respondent, at her expense, shall successfully complete a course in medication administration and documentation pre-approved by the Department. Respondent shall provide proof to the satisfaction of the Board of her successful completion of the course within 30 days of completion.

E. If Respondent pursues further training in any subject area that is regulated by the Department, Respondent shall provide a copy of this Decision to the educational institution or, if not an institution, to Respondent's instructor. Such institution or instructor shall notify the Department in writing as to receipt of a copy of this Decision within 15 days of receipt. Said notification shall be submitted directly to the Department at the address cited in Paragraph G below.

F. The Department must be informed in writing prior to any change of address.

G. All communications, payments if required, correspondence, and reports are to be addressed to:

Lavita Sookram, RN, Nurse Consultant
Practitioner Monitoring and Compliance Unit
Department of Public Health
Division of Health Systems Regulation
Board of Examiners for Nursing
410 Capitol Avenue, MS #12HSR
P. O. Box 340308
Hartford, CT 06134-0308

2. Any deviation from the terms of probation, without prior written approval by the Board, shall constitute a violation of probation, which will be cause for an immediate hearing on charges of violating this Order. Any finding that Respondent has violated this Order will subject Respondent to sanctions under Conn. Gen. Stat. §§ 19a-17(a) and (c), including but not limited to, the revocation of her license. Any extension of time or grace period for reporting granted by the Board shall not be a waiver or preclude the Board's right to take subsequent action. The Board shall not be required to grant future extensions of time or grace periods. Notice of revocation or other disciplinary action shall be sent to Respondent's address of record (most current address reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department).

3. This document has no bearing on any criminal liability without the written consent of the Director of Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.

This Order is effective on the date it is signed by the Board.
The Board hereby informs Respondent, Melissa Eccles, and the Department of this decision.

Dated at Hartford, Connecticut this day of May 2020.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair

STATE OF CONNECTICUT

BOARD OF EXAMINERS FOR NURSING

Dana Kendrick, R.N. Re: Reinstatement Request
License No. 095381

MEMORANDUM OF DECISION

Procedural Background

On September 5, 2018, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board") against Dana Kendrick ("Petitioner"). The Charges alleged that Petitioner had violated Chapter 378 of the Connecticut General Statutes ("Conn. Gen. Stat."), subjecting Petitioner's registered nurse ("R.N.") license to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17(f) and 20-99(b). Board ("Bd.") Exhibit ("Ex.") 3.

On November 27, 2018, the Charges and Notice of Hearing were sent by certified and first-class mail to Petitioner's last known address of record. The Charges and Notice of Hearing were also sent via electronic mail to jamellpp@yahoo.com. The electronic email was not returned as undeliverable. Bd. Ex. 3, p. 1.

The hearing was held on January 16, 2019. Petitioner failed to appear and was not represented by counsel. Attorney Matthew Antonetti represented the Department. Bd. Ex. 3, p. 2.

As Petitioner did not appear at the hearing and did not file an Answer to the Chargers, the allegations contained in the Charges were deemed admitted and true. *Id.*

On May 20, 2019, the Board issued a Memorandum of Decision ("Decision") in Petition No. 2018-138, revoking Petitioner's R.N. license effective May 15, 2019. Bd. Ex. 3, p. 4. The Decision was based on the Nevada State Board of Nursing's disciplinary actions taken against Petitioner's R.N. license on February 2, 2018 as detailed in the Memorandum of Decision in Case No. 0855-17C ("Nevada Order"). The Nevada Order disciplined Petitioner's Nevada R.N. license with a reprimand and ordered continuing education and urine drug testing for one year. The Nevada Order resulted from Petitioner testing positive for marijuana when she reported for work on August 16, 2017. Bd. Ex. 3, pp. 3, 4.

In May 2019, Petitioner requested a hearing before the Board, seeking reinstatement of her license. Bd. Ex. 1; Tr. p. 10. The Department did not file an objection to Petitioner's request for a hearing.

Pursuant to Petitioner's request for a reinstatement hearing, the Board issued to Petitioner a Notice of Hearing ("Notice") dated September 23, 2019. Bd. Ex. 2. The hearing was scheduled for December 18, 2019. *Id.*

On December 18, 2019, the Board heard Petitioner's request for reinstatement of her R.N. license. At the hearing, Petitioner was self-represented. Tr. p. 2. Attorney Matthew Antonetti represented the Department. Tr. p. 2.

Each member of the Board attests that he or she was present at the hearing or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services,* 228 Conn. 651 (1994).

Findings of Fact

Based on the testimony given and the exhibits offered into evidence, the Board makes the following findings of fact:

1. Petitioner previously held Connecticut R.N. license number 095381. Bd. Ex. 3.

2. From September 2015 to mid-May 2019, Petitioner lived and practiced nursing in Nevada. Bd. Ex. 1.

3. On August 16, 2017, Petitioner was employed and working as a licensed R.N. at the Northern Nevada Medical Center, in Sparks, Nevada. On that date, Petitioner reported for duty and exuded a strong odor of marijuana. Petitioner tested positive for marijuana. Department ("Dept.") Ex. 1, pp. 7-8.

4. On February 2, 2018, the Nevada State Board of Nursing disciplined Petitioner's Nevada R.N. license with a reprimand and ordered Petitioner to complete continuing education and submit to urine drug testing for one year. Dept. Ex 1, p. 12.

5. On May 15, 2019, the CT Board issued an Order which revoked Petitioner's R.N. license. The CT Board's Order was based on the Nevada State Board of Nursing's February 2, 2018 disciplinary actions taken against Petitioner's R.N. license as detailed in the Memorandum of Decision in Case No. 0855-17C ("Nevada Order"). Bd. Ex. 3, pp. 3, 4; Dept. Ex. 1, pp. 7-13, Dept. Ex. 2.

6. On May 15, 2019, pursuant to the requirements of the Nevada Order, Petitioner successfully completed the education program and random drug testing. Dept. Ex. 2; Tr. pp. 9-11.

7. On or about September 23, 2019, Petitioner requested a hearing before the Board, seeking reinstatement of her R.N. license. Bd. Ex. 2.

8. At the hearing, Petitioner submitted documentation in support of her request for the reinstatement of her license. The documents include Petitioner's self-assessment essay (Bd. Ex. 1), 18 drug screen reports, all of which were negative, (Petitioner ("Pet.") Ex. 1, under seal) and personal letters of recommendation (Pet. Ex. 2).

9. Petitioner was a credible witness. Tr. pp. 9-11.

Discussion and Conclusions of Law

Conn. Gen. Stat. § 19a-17(e) provides, in pertinent part, that the Board "may reinstate a license that has been suspended or revoked if, after a hearing, such board … is satisfied that the practitioner … is able to practice with reasonable skill and safety to patients, customers or the public in general. As a condition of reinstatement, the board or commission or the department may impose disciplinary or corrective measures authorized under this section."

The Petitioner has the burden of satisfying the Board that she is able to practice nursing with reasonable skill and safety. At the hearing, the Department had no objections to Petitioner's request for reinstatement of her license. Tr. pp. 11-12. The Board finds that Petitioner presented sufficient and credible evidence to satisfy her burden that she is able to resume the practice of nursing with reasonable skill and safety. Findings of Fact ("FF") 2-9.

Prior to the hearing, Petitioner was informed that she would be required to provide evidence at the reinstatement hearing that documented the "outcomes of [her] efforts toward recovery" over an extended period of time. Bd. Ex. 2. The Petitioner was also advised that such evidence should include all of the following:

1) Documentary or testimonial evidence from her therapist establishing a lengthy period of drug/alcohol free status demonstrated by therapy reports that affirm her ability to administer safe nursing care, including the administration of controlled substances;
2) personal references documenting a lengthy period of drug/alcohol free status as well as her emotional health and work habits;
3) documentary or testimonial evidence from current and past employers documenting her ability to carry out assigned duties responsibly and accurately and her potential for functioning safely and effectively as a nurse;

4) copies of random, legally defensible urine screen reports documenting the frequency of testing, the conditions under which the specimens were taken, and the results of the tests;
5) documentation of Petitioner's participation in support groups and support of a sponsor, as well as the outcome of her participation in such support groups;
6) documentation from her therapist and/or physician which includes a list of current medications prescribed by all health care providers, including a need for such medications and an assessment of a continued need for such medications.

Id.

At the hearing, Petitioner submitted documentation in support of her request for the reinstatement of her license.[1] The documents include Petitioner's self-assessment essay (Bd. Ex. 1), 18 drug screen reports, all negative (Petitioner ("Pet.") Ex. 1, under seal), and personal letters of recommendation (Pet. Ex. 2).

At the hearing, Petitioner credibly testified that she accepted full responsibility for her misconduct when she worked as an R.N. in Nevada. She also testified that she had no issues at her job and that she did everything she was supposed to do to complete the requirements of the Nevada Oder.. FF 6, 8.

Petitioner further testified that it was not until she moved back to CT that she learned that her CT R.N. license had been revoked. Order. Tr. p. 10. Despite the Department's numerous attempts to reach Petitioner by certified mail, first class mail, and email (Bd. Ex. 3, pp. 1, 2; Dept. Ex 1, pp. 15-21), she could not be reached because she had failed to inform the Department in writing of her change in address. Accordingly, because Petitioner had not responded to the Department's inquiries about the Nevada Order and subsequently failed to appear at the January 16, 2019 hearing, the Board ordered the revocation of Petitioner's CT R.N. license. Bd. Ex. 3.

Petitioner acknowledged that the Department sent her correspondence to an address in Nevada where she was no longer living. The correspondence was not forwarded to her new address in Nevada. When Petitioner returned to CT, she learned that the Department had also

[1] Petitioner's self-assessment essay states that while she was on probation in Nevada, she was not required to have a sponsor or a therapist. Petitioner's essay further explains that she did not participate in any support groups and she is not on any medication. Accordingly, Petitioner's essay expressed that she could not provide the Board with documentation for these specific documentary requests. Bd. Ex. 1.

mailed correspondence to her grandmother's house, but it was not forwarded to her in Nevada. She testified that her grandmother has Alzheimer's disease and was not able to inform her about the letter from the Department. Bd. Ex. 1; Tr. pp. 9-10.

As noted in the Findings of Fact and foregoing discussion, the Board finds that Petitioner has presented relevant and credible evidence to sustain her burden of satisfying the Board that she is able to resume the practice of nursing with reasonable skill and safety pursuant to the Order below.

Order

Pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99, the Board hereby orders that Petitioner Dana Kendrick's R.N. license number 095381 is hereby reinstated with no restrictions or probation.

This Order becomes effective on the date of signature.

The Board hereby informs Petitioner, Dana Kendrick, and the Department of this decision.

Dated at Hartford, Connecticut this _____day of May, 2020.

BOARD OF EXAMINERS FOR NURSING

_____

Patricia Bouffard, D.N.Sc., Chairperson

STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING

Tammy Piccirillo, L.P.N. Petition No. 2019-839
License No. 037336

MEMORANDUM OF DECISION

I

Procedural Background

On August 5, 2019, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board"). Board ("Bd.") Exhibit ("Ex.") 3. On that date, the Department also filed a Motion for Summary Suspension ("Motion") with the Board. Bd. Ex. 1. The Charges allege violations of Chapter 378 of the General Statutes of Connecticut ("Conn. Gen. Stat.") by Tammy Piccirillo ("Respondent"), which would subject Respondent's licensed practical nurse ("L.P.N.") license to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

Based on the allegations in the Charges, the Board found that Respondent's continued nursing practice presented a clear and immediate danger to public health and safety. Accordingly, on August 14, 2019, pursuant to Conn. Gen. Stat. § 4- 182(c) and § 19a-17(c), the Board ordered that Respondent's L.P.N. license be summarily suspended pending a final determination by the Board of the allegations contained in the Charges ("Summary Suspension Order.") Bd. Ex. 2.

On August 15, 2019, the Department mailed the Summary Suspension Order, Charges, and Notice of Hearing ("Notice") by first class and certified mail to Respondent's address of record, 12 Elm Street, Seymour, CT, and to her email address at tpiccirillo50@gmail.com. Bd. Ex. 4. The Notice informed that a hearing had been scheduled for September 18, 2019.

On August 17, 2019, the tracking records of the United States Postal Service ("USPS") indicated that the correspondence was left with an individual at the Seymour address. Bd. Ex. 5.

On September 11, 2019, Respondent emailed the Department requesting a continuance of the September 18, 2019 hearing. Without objection from the Department, the Board granted Respondent's request and the hearing was continued to November 20, 2019. Bd. Ex. 6. Subsequently, the Department sent written notification of the continued hearing date via certified

mail and first-class mail to Respondent's address of record and to Respondent's email address. The certified mail was delivered to the Respondent on September 13, 2019.

On October 7, 2019, the certified mail that had been delivered to Respondent's address of record on September 13, 2019 was returned to the Department. The certified mailing was stamped "return to sender," "unclaimed," and "unable to forward." Bd. Ex. 7. The first-class mail was not returned and there is no evidence in the record that the Department's electronic transmission sent to Respondent's email address was not successfully completed.

On November 20, 2019, the Board held the hearing. Respondent was not present at the hearing and was not represented by an attorney. Tr. p. 2. Attorney Brittany Allen represented the Department. *Id.*

Respondent did not file~~d~~ an Answer to the Charges within 14 days of her receipt of the Notice. Due to Respondent's failure to timely file an Answer to the Charges, Attorney Allen orally moved on the record to deem the allegations admitted ("Motion to Deem"). Tr. p. 5. Based on the evidence that Respondent had previously communicated with the Department via email and given that the first-class mail informing Respondent of the rescheduled hearing date was not returned, the Board determined that Respondent was properly served. Attorney Allen's Motion was granted. Tr. pp. 5-6.

Following the close of the record, the Board conducted fact finding.

Each member of the Board involved in this decision attests that he or she was present at the hearing or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services,* 228 Conn. 651 (1994).

II

Allegations

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Seymour, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 037336. Bd. Ex. 3.

2. In paragraph 2 of the Charges, the Department alleges that on May 15, 2019, the Board approved a Consent Order in Petition No. 2018-684 that placed Respondent's license on probation for four years. Such disciplinary action was based on Respondent's abuse and/or utilization of opiates to excess. Bd. Ex. 3.

3. In paragraph 3 of the Charges, the Department alleges that said Consent Order specifically provided that Respondent shall submit to random urine screens which shall be negative for the presence of alcohol and drugs. Bd. Ex. 3.

4. In paragraph 4 of the Charges, the Department alleges Respondent has not submitted for random urine screens in accordance with the terms of probation.

5. In paragraph 5 of the Charges, the Department alleges that Respondent's conduct as described above constitutes a violation of the terms of probation as set forth in the May 15, 2019 Consent Order, and subjects Respondent's license to revocation or other disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

III

Findings of Fact

1. Respondent, of Seymour, Connecticut, is, and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 037336. Bd. Ex. 3

2. On May 15, 2019, the Board approved a Consent Order in Petition No. 2018-684 that placed Respondent's license on probation for four years. Such disciplinary action was based upon Respondent's abuse and/or utilization of opiates to excess. Bd. Ex. 3.

3. Said Consent Order specifically provided that Respondent shall submit to random urine screens which shall be negative for the presence of alcohol and drugs. Bd. Ex. 3.

4. Respondent has not submitted for random urine screens in accordance with the terms of probation. Bd. Ex. 3.

5. On August 15, 2019, the Department mailed the Summary Suspension Order, Charges, and Notice by first class and certified mail to Respondent's address of record, 12 Elm Street, Seymour, CT, and to her email address at tpiccirillo50@gmail.com. Bd. Ex. 4.

6. On August 17, 2019, the USPS left the correspondence with an individual at the Respondent's Seymour address. Bd. Ex. 5.

7. On September 11, 2019, Respondent requested a continuance of the hearing which had been scheduled for September 18, 2019. The Board granted Respondent's request and the hearing was continued to November 20, 2019. Bd. Ex. 6.

8. The Department sent written notification of the continued hearing date via certified mail and first-class mail to Respondent's address of record and to Respondent's email address. The certified mail was delivered to Respondent on September 13, 2019. Bd. Ex. 7.

9. On October 7, 2019, the certified mail that had been delivered to Respondent's address of record on September 13, 2019 was returned to the Department. The certified mailing

was stamped "return to sender," "unclaimed," and "unable to forward." Bd. Ex. 7. The first-class mail was not returned and there is no evidence in the record that Respondent did not receive the correspondence via her email address. *Id.*

10. The Department provided Respondent with reasonable and adequate written notice of the hearing and the allegations contained in the Charges. Tr. p. 5.

11. Respondent failed to appear for the hearing and did not request a second continuance. Tr. p. 5.

12. The factual allegations contained in paragraphs 1 through 4 of the Charges are deemed admitted and true. Tr. pp. 5-6.

IV

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727, 739-740 (2013). The Department sustained its burden of proof with respect to all of the allegations contained in the Charges.

Conn. Gen. Stat. § 20-99 (a) provides, in pertinent part,:

> The Board . . . shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons licensed to practice nursing. After holding a hearing . . . said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17. . . .

Conn. Gen. Stat. § 20-99(b) sets forth specific conduct which fails to conform to the accepted standards of the nursing profession and makes clear that nonconforming conduct is not limited to the behavior identified in the subsection. Pursuant to Conn. Gen. Stat. § 19a-17(a), the Board is authorized to impose discipline on a license upon the finding of good cause.

Since Respondent did not file an Answer to the Charges, the allegations are deemed admitted and true. *See,* Conn. State Agencies § 19a-9-20. The record establishes that on May 15, 2019, the Board approved a Consent Order in Petition No. 2018-684 that placed Respondent's license on probation for four years. Such disciplinary action was based upon Respondent's abuse and/or utilization of opiates to excess. FF 2. The Consent Order specifically required Respondent to submit to random urine screens and the results of those screens be negative for the presence of alcohol and drugs. FF 3. The record establishes that

Respondent has not submitted to random urine screens in accordance with the probationary terms of the Consent Order. FF 4.

Based on Respondent's noncompliance with the terms of the Consent Order, the Board finds that such violation constitutes good cause for the Board to discipline her license.

Therefore, the Board concludes that Respondent's above-described conduct, as deemed to be admitted and true, constitutes grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 20-99(b) and 19a-17.[1] Based on the totality of the evidence, revocation of Respondent's license is deemed an appropriate remedy.

V

Order

Based on the record in this case, the above findings of fact and conclusions of law, the Board hereby orders that Tammy Piccirillo's license number 037336 to practice as a licensed practical nurse is hereby revoked.

This Order is effective on the date it is signed by the Board.

The Board hereby informs Respondent, Tammy Piccirillo, and the Department of this Decision.

Dated at Hartford, Connecticut this day of May~~,~~ 2020.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair

[1] Pursuant to Conn. Gen. Stat. § 19a-17, the Board may impose disciplinary action, as set forth in the Statute, upon a finding of the existence of good cause.

STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING

Amy Slepica, RN
License No. 149557

Petition No. 2018-1418

MEMORANDUM OF DECISION

Procedural Background

On July 30, 2019, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board") against Amy Slepica ("Respondent"). Board ("Bd") Exhibit ("Ex.") 1. The Charges allege violations of Chapter 378 of the Connecticut General Statutes ("Conn. Gen. Stat.") by Respondent which would subject Respondent's registered nurse ("RN") license to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

On July 31, 2019, the Charges and Notice of Hearing ("Notice") were sent to Respondent scheduling a hearing for October 16, 2019. Bd. Ex. 2. The Notice informed Respondent that the Board had scheduled a hearing for October 16, 2019. Subsequently, the October 16, 2019 hearing was rescheduled to December 18, 2019. A notice informing Respondent that the hearing was rescheduled to December 18, 2019 was sent by certified and first class mail to: 20873 Hartford Way, Lakeville, MN, 55044.[1] On that date, the Notice was also sent to Respondent's electronic mail ("e-mail") address of record on file with the Department, acady122@gmail.com.

The United States Postal Service ("USPS") tracking system indicated that on September 26, 2019 at 12:17 p.m., the Charges and Notice sent via certified mail to 20873 Hartford Way, Lakeville, MN, 55044 were "Delivered, Left with Individual." The Charges and Notice sent via first class mail to 20873 Hartford Way, Lakeville, MN, 55044 were not returned to the Department. The Notice sent via e-mail to acady122@gmail.com was not returned to the Department as undeliverable.

[1] Pursuant to Conn. Gen. Stat. § 19a-89, "Whenever any person holding a license . . . issued by the Department of Public Health changes his office or residence address, he shall, within thirty days thereafter notify said department of his new office or residence address." In this case, Respondent did not provide the Department any notification of a change of address as required by § 19a-89. Therefore, notice was sent to Respondent's last known address of record and service of notice to such address is deemed sufficient. Dept. Ex. 1, p. 32.

The hearing was held on December 18, 2019. Respondent failed to appear and she was not represented by counsel. Attorney Matthew Antonetti represented the Department. Transcript ("Tr.") pages ("pp.") 1-10.

Respondent did not file an Answer to the Charges. Tr., p. 4. Attorney Antonetti orally moved to deem the allegations admitted ("Motion"). The Board granted Attorney Antonetti's Motion. Tr., pp. 4, 5.

Each member of the Board involved in this decision attests that he/she was present at the hearing or has reviewed the record and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services,* 228 Conn. 651 (1994).

Allegations

1. In paragraph 1 of the Charges, the Department alleges that Respondent, of Lakeville, Michigan, is the holder of Connecticut license number 149557 as a registered nurse.

Count One

2. In paragraph 2 of the Charges, the Department alleges that on or around December 6, 2018, the Minnesota Board of Nursing disciplined Respondent's Minnesota license to practice nursing pursuant to a Stipulation and Consent Order ("Minnesota Order"), including, in part, limitations on Respondent's Minnesota license pending completion of a nursing refresher course, nursing supervisor reports, and a mental health evaluation and compliance with treatment recommendations.

3. In paragraph 3 of the Charges, the Department alleges that the Minnesota Order was based, in part, upon multiple findings that Respondent failed to provide appropriate patient care and failed to maintain adequate patient records.

4. In paragraph 4 of the Charges, the Department alleges that on or around May 14, 2019, the State of Texas Board of Nursing Eligibility and Disciplinary Committee revoked Respondent's Texas nursing license in an action premised on the Minnesota Order.

5. In paragraph 5 of the Charges, the Department alleges that on or around June 5, 2019, the State of California Board of Registered Nursing revoked Respondent's California nursing license pursuant to a Default Decision and Order in Case No. 2019-634 premised on the Minnesota Order.

6. In paragraph 6 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to the

General Statutes of Connecticut §§ 19a-17(f) and/or 20-99(b), including but not limited to, § 20-99(b)(2).

Count Two

7. In paragraph 7 of the Charges, the Department alleges that the allegations set forth in paragraphs 1 and 2 are incorporated herein by reference as if set forth in full.

8. In paragraph 8 of the Charges, the Department alleges that on or about December 13, 2017, Respondent completed her Connecticut application for nursing licensure by endorsement.

9. In paragraph 9 of the Charges, the Department alleges that the Respondent answered "no" to Question 25 on her licensure application which asks: "Have you ever been subject to, or do you currently have pending, any complaint, investigation, charge or disciplinary action by any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction or any disciplinary board/committee of any branch of the armed services? You need not report any complaints dismissed without merit."

10. In paragraph 10 of the Charges, the Department alleges that on or about November 9, 2017, a Notice of Conference was sent to Respondent to discuss the allegations in the Minnesota matter.

11. In paragraph 11 of the Charges, the Department alleges that on or about November 2, 2018, Respondent completed her renewal application for her Connecticut nursing license.

12. In paragraph 12 of the Charges, the Department alleges that Respondent answered "no" to Question 32 on her renewal application which asks" "Within the last year, have you had any disciplinary action taken against you or any such actions pending by any State, federal government jurisdiction, District of Columbia, United States possession or territory or foreign jurisdictions licensing/certification authority?"

13. In paragraph 13 of the Charges, the Department alleges that according to the Minnesota Order, Respondent and her attorney appeared before a Minnesota Review Panel on January 25, 2018 to discuss the allegations made in the Notice of Conference dated November 9, 2017 and Respondent and her attorney appeared before the Minnesota Office of Administrative Hearing on October 16, 2018 to discuss the Minnesota matter.

14. In paragraph 14 of the Charges the Department alleges that the above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut §§ 20-99(b), including but not limited to, § 20-99(b)(1) and/or 20-99(b)(6).

Findings of Fact

1. The Department provided Respondent with reasonable and adequate written notice of the December 18, 2019 hearing and the allegations contained in the Charges. Bd. Ex. 1, 2.

2. On December 18, 2019, the Board convened the scheduled hearing. Respondent did not appear at the hearing and did not request a continuance. Tr., pp. 1-10.

3. Respondent did not file an Answer to the Charges. Tr., p. 4.

4. The factual allegations contained in paragraphs 1 through 14 of the Charges are deemed admitted and true. Tr., pp. 4, 5.

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727, 739-740 (2013). The Department sustained its burden of proof as to all of the allegations contained in the Charges.

Conn. Gen. Stat. §20-99 provides, in pertinent part, that:

> (a) The Board . . . shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons licensed to practice nursing. After holding a hearing . . . said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17. . . .
>
> (b) Conduct which fails to conform to the accepted standards of the nursing profession includes, but is not limited to, the following: . . . (1) Fraud or material deception in procuring or attempting to procure a license to practice nursing; . . . (2) illegal conduct, incompetence or negligence in carrying out usual nursing functions; . . . (6) fraud or material deception in the course of professional services or activities.

Conn. Gen. Stat. § 19a-17(f) provides, in pertinent part:

> Such board . . . may take disciplinary action against a practitioner's license or permit as a result of the practitioner having been subject to disciplinary action similar to an action specified in subsection (a) of this section by a duly authorized professional disciplinary agency of any state, the federal government, the District of Columbia, a United States possession or territory or a foreign jurisdiction. Such board . . . may rely upon the findings and conclusions made by a duly authorized professional disciplinary agency of any state, the federal government, the District of Columbia, a United States possession or territory or foreign jurisdiction in taking such disciplinary action.

In accordance with § 19a-9-20 of the Regulations, a hearing shall proceed, "at the time and place specified in the notice of hearing, notwithstanding any failure of Respondent to file an answer within the time provided. If no answer has been timely filed, the allegations shall be deemed admitted." In this case, Respondent failed to file an Answer to the Charges and did not appear at the hearing to contest the allegations. Thus, the allegations are deemed admitted and the record establishes that the Department sustained its burden of proof with respect to all of the allegations in the Charges. Tr., pp. 4, 5; Department ("Dept.") Exhibit (" Ex.") 1.

In this case, a preponderance of the evidence establishes that the Respondent is of Lakeville, Minnesota and holds Connecticut RN license number 149557. Tr., pp.4, 5; Dept. Ex. 1, p. 3.

With respect to Count One of the Charges, the allegations are deemed admitted and a preponderance of the evidence establishes that on or around December 6, 2018, the Minnesota Board of Nursing disciplined Respondent's Minnesota license to practice nursing. The Minnesota Order, disciplining Respondent's nursing license, included, among other mandates and restrictions, a limitation on Respondent's nursing license pending completion of a nursing refresher course, a requirement that nursing supervisor reports be submitted to the Minnesota Board of Nursing, and a requirement that Respondent submit to a mental health evaluation and comply with any and all treatment recommendations. (Tr., pp.4, 5; Dept. Ex, 1, pp. 9-25) The Minnesota Order was based, in part, upon findings that Respondent failed to provide appropriate patient care and maintain adequate patient records, (Tr., pp.4, 5; Dept. Ex, 1, pp. 9-25), which constitutes a violation of Conn. Gen. Stat. § 20-99(b)(2). On or around May 14, 2019, the Texas Board of Nursing Eligibility and Disciplinary Committee revoked Respondent's Texas nursing license pursuant to a default decision and order that was based on the Minnesota Order. (Tr., pp.4, 5; Dept. Ex, 1, pp. 41-60, 79-94) On or around June 5, 2019, the California Board of Registered Nursing revoked Respondent's California nursing license pursuant to a Default Decision and Order in Case No. 2019-634 based on the Minnesota Order. (Tr., pp.4, 5; Dept. Ex, 1, pp. 61-74, 95-107) Such actions constitute grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17, 19a-17(f), and 20-99(a).

With respect to Count Two of the Charges, the allegations are deemed admitted. Moreover, a preponderance of the evidence establishes that on November 9, 2017, a Notice of

Conference was sent to Respondent by the Minnesota Board of Nursing. The Notice of Conference informed Respondent that a conference had been scheduled to discuss several allegations, including, but not limited to, Respondent's failure to provide appropriate patient care and failure to maintain adequate patient records. (Tr., pp.4, 5; Dept. Ex, 1, pp. 5, 9) On December 13, 2017, subsequent to receiving the Minnesota Board's Notice of Conference, informing Respondent that allegations were pending regarding her Minnesota nursing license, Respondent completed her Connecticut application for nursing licensure by endorsement. On the Connecticut nursing license application, Respondent answered "No" to question 25 which inquires: "Have you ever been subject to or do you currently have pending, any complaint, investigation, charge or disciplinary action by any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction or any disciplinary board/committee of any branch of the armed services? You need not report any complaints dismissed without merit." (Tr., pp.4, 5; Dept. Ex, 1, pp. 109, 110, 123-126)

On January 25, 2018, Respondent and her attorney appeared before a Minnesota Review Panel to discuss the allegations made in the November 9, 2017 Notice of Conference. (Tr., pp.4, 5; Dept. Ex, 1, pp. 5-9) On October 16, 2018, Respondent and her attorney appeared before the Minnesota Office of Administrative Hearings to discuss the allegations outlined in the Minnesota Notice of Conference. (Tr., pp.4, 5; Dept. Ex, 1, pp. 5-9)

On November 2, 2018, Respondent completed her renewal application for her Connecticut nursing license and answered "No" to question 32, which inquires of the applicant: "Within the last year, have you had any disciplinary action taken against you or any such actions pending by any state or federal government jurisdiction, District of Columbia, United States possession or territory or foreign jurisdictions licensing/certification authority?" (Tr., pp.4, 5; Dept. Ex, 1, pp. 109, 127-129). Respondent's conduct constitutes fraud or material deception in violation of Conn. Gen. Stat. §§ 20-99(b)(1) and (6) and grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17, 19a-17(f), and 20-99(a).

The Board concludes that Respondent's conduct, as alleged in the Counts One and Two of the Charges, and as deemed admitted and established by a preponderance of the evidence, constitutes grounds for disciplinary action pursuant to Conn. Gen Stat. §§ 20-99(a), 20-99(b)(1), (2) and (6), 19a-17 and 19a-17(f). The Board further concludes based upon a preponderance of

the evidence that Respondent cannot practice as a registered nurse with reasonable skill and safety.

Order

Based on the record in this case, the above findings of fact and conclusions of law, and pursuant to the authority vested in it by Conn. Gen. Stat. §§ 19a-17 and 20-99, the Board finds that the misconduct alleged and proven is severable and warrants the disciplinary action imposed by this order:

1. Respondent's license number 149557 to practice as a registered nurse in the State of Connecticut is hereby REVOKED based on the disciplinary action imposed by the Minnesota Board of Nursing for Respondent's failure to provide appropriate patient care and maintain adequate patient records.
2. Respondent's license number 149557 to practice as a registered nurse in the State of Connecticut is hereby REVOKED based on the false statements Respondent made on December 13, 2017 on her Connecticut application for nursing licensure by endorsement and on November 2, 2018 on her nursing license renewal application.
3. This Memorandum of Decision becomes effective upon signature.

The Board of Examiners for Nursing hereby informs Respondent, Amy Slepica, and the Department of this decision.

Dated at Hartford, Connecticut this _____ day of _____, 2020.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair

SUMMARY SUSPENSION COVER SHEET

In Re: Kimberly Lemire, RN Petition No. 2019-1237

1. Kimberly Lemire of Pascoag, Rhode Island (hereinafter "respondent") graduated from Rhode Island Community College in 2017 and was licensed to practice nursing in Connecticut 2018. She is also licensed to practice nursing in Rhode Island.
   She has not been previously disciplined however, she has been the subject of three Department of Consumer Protection, Drug Control Division, Investigations for suspected diversion of controlled substance medications from multiple facilities.

2. On various occasions between October 2018 and April 2019, while practicing nursing at Mount St. Rita Health Centre, Cumberland, Rhode Island, respondent:

   a. failed to completely, properly and/or accurately document medical or hospital records including, but not limited to, documenting withdrawal of controlled substance medications without corresponding documentation of administration and/or documenting the waste of controlled substances without a witness' co-signatures;
   b. failed to properly administer and/or document administration of controlled substance medications to patients;
   c. failed to properly waste controlled substance medications; and/or
   d. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records;

3. On various occasions in September and/or October 2019, while practicing nursing at Bayview Health Care Center, in Waterford, Connecticut, respondent:

   a. failed to completely, properly and/or accurately document medical or hospital records;
   b. failed to appropriately safeguard controlled substance medications; and/or
   c. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records.

4. On various occasions between October and December 2018, while practicing nursing at Pine Grove Healthcare Center, in Pascoag, Rhode Island, respondent:

   a. denied a patient pain medication after said patient reported that he was in pain and requested pain medication;
   b. diverted oxycodone from hospital stock;
   c. failed to properly administer and/or document administration of controlled substances to patients;

d. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records;
e. failed to properly waste controlled substances; and/or
f. changed the medication counts.

5. On various occasions between July 2017 and October 2018, while practicing nursing at Overlook Healthcare Center, Pascoag, Rhode Island, respondent:

a. failed to properly waste controlled substances.
b. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records; and/or
c. failed to properly waste controlled substances.

6. On various occasions between October and November 2019, while practicing nursing at at Villa Maria Nursing and Rehabilitation Center, in Plainville, Connecticut respondent:

a. failed to properly administer and/or document administration of controlled substances to patients;
b. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records;
c. failed to properly waste controlled substances;
d. failed to appropriately safeguard controlled substance medications; and/or
e. falsified a Controlled Substance Disposition Record by signing another person's name as a witness to wasting controlled substance medication ("the waste) when, in fact the person whose name was signed did not witness the waste.

7. In January 2020, while practicing nursing at Three Rivers Healthcare, in Norwich, Connecticut respondent:

a. failed to appropriately safeguard controlled substance medications; and/or
b. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records.

8. Respondent's practice of nursing falls below the standard of care in one or more of the following ways, including, but not limited to that she practiced nursing in a substandard and/or careless manner.

9. For the foregoing reasons, the Department believes that respondent's continued nursing practice represents a clear and immediate danger to the public health and safety. The Department respectfully requests that the Board summarily suspend respondent's nursing license until a full hearing on the merits can be held.

CONFIDENTIALITY NOTICE: This document and all attachments may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition. Thank you.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Kimberly Lemire, RN Petition No. 2019-1837

MOTION FOR SUMMARY SUSPENSION

The Department of Public Health (hereinafter "the Department") hereby moves in accordance with Connecticut General Statutes §§4-182(c) and 19a-17(c) that the Connecticut Board of Examiners for Nursing summarily suspend Kimberly Lemire's nursing license in Connecticut. This motion is based on the attached Statement of Charges, Affidavits and on the Department's information and belief that Kimberly Lemire's continued nursing practice represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 7th day of May, 2020.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH --
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Kimberly Lemire, RN Petition No. 2019-1237

STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Kimberly Lemire:

1. Kimberly Lemire of Watertown, Connecticut (hereinafter "respondent") is the holder of Connecticut registered nursing license number 155761.

2. On various occasions between October 2018 and April 2019, while practicing nursing at Mount St. Rita Health Centre, Cumberland, Rhode Island, respondent:

    a. failed to completely, properly and/or accurately document medical or hospital records including, but not limited to, documenting withdrawal of controlled substance medications without corresponding documentation of administration and/or documenting the waste of controlled substances without a witness' co-signatures;
    b. failed to properly administer and/or document administration of controlled substance medications to patients;
    c. failed to properly waste controlled substance medications; and/or
    d. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records.

3. On various occasions in September and/or October 2019, while practicing nursing at Bayview Health Care Center, Waterford, Connecticut, respondent:

    a. failed to completely,properly and/or accurately document medical or hospital records;
    b. failed to appropriately safeguard controlled substance medications in the medication cart; and/or
    c. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records.

4. On various occasions between October and December 2018, while practicing nursing at Pine Grove Healthcare Center, in Pascoag, Rhode Island, respondent:

    a. denied a patient pain medication after said patient reported that he was in pain and requested pain medication;
    b. diverted Oxycodone from hospital stock;
    c. failed to properly administer and/or document administration of controlled substances to patients;
    d. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records;and/or
    e. failed to properly waste controlled substances.

5. On various occasions between July 2017 and October 2018, while practicing nursing at Overlook Healthcare Center, Pascoag, Rhode Island, respondent:

    a. failed to properly waste controlled substances.
    b. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records; and/or
    c. failed to properly waste controlled substances.

6. On various occasions between October and November 2019, while practicing nursing at at Villa Maria Nursing and Rehabilitation Center, in Plainville, Connecticut respondent:

    a. failed to properly administer and/or document administration of controlled substances to patients;
    b. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records;
    c. failed to properly waste controlled substances;
    d. failed to appropriately safeguard controlled substance medications; and/or
    e. falsified a Controlled Substance Disposition Record by signing another person's name as a witness to wasting controlled substance medication ("the waste) when, in fact the person whose name was signed did not witness the waste.

7. In January 2020, while practicing nursing at Three Rivers Healthcare, in Norwich, Connecticut respondent:

    a. failed to appropriately safeguard controlled substance medications; and/or
    b. falsified, maintained and/or improperly documented one or more Controlled Substance Disposition Records.

SUMMARY COVER SHEET

In Re: Kimberly Smith, L.P.N. Petition No. 2019-592

1. Kimberly Smith of Watrerville, Connetcticut (hereinafter "respondent") graduated from New England Technical Institute and was licensed to practice nursing in 2005.
2. At all times, respondent was practicing as a licensed practical nurse at Countryside Manor of Bristol ("facility") in Bristol, Connecticut.
3. On various occasions from approximately December 2018 through April 2019, respondent:
    a. diverted oxycodone, Tylenol #3, tramadol, clonazepam and/or Percocet from said facility;
    b. failed to completely, properly and/or accurately document medical or facility records; and/or,
    c. falsified one or more Controlled Substance Receipt Records.
4. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99(b), including but not limited to:
    a. §20-99(b)(2); and/or
    b. §20-99(b)(6).
5. For the foregoing reasons, the Department believes that respondent's continued nursing practice represents a clear and immediate danger to the public health and safety. The Department respectfully requests that the Board summarily suspend respondent's nursing license until a full hearing on the merits can be held.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Kimberly Smith, L.P.N. Petition No. 2019-592

MOTION FOR SUMMARY SUSPENSION

The Department of Public Health (hereinafter "the Department") hereby moves in accordance with Connecticut General Statutes §§4-182(c) and 19a-17(c) that the Connecticut Board of Examiners for Nursing summarily suspend Kimberly Smith's nursing license in Connecticut. This motion is based on the attached Statement of Charges, Affidavits and on the Department's information and belief that Kimberly Smith's continued nursing practice represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 20th day of April, 2020.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Kimberly Smith, L.P.N. Petition No. 2019-592

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Kimberly Smith:

1. Kimberly Smith of Watertown, Connecticut (hereinafter "respondent") is the holder of Connecticut registered nursing license number 031191.
2. At all times, respondent was practicing as a licensed practical nurse at Countryside Manor of Bristol ("facility") in Bristol, Connecticut.
3. In various occasions from approximately December 2018 through April 2019, respondent:
    a. diverted oxycodone, Tylenol #3, tramadol, clonazepam and/or Percocet from said facility;
    b. failed to completely, properly and/or accurately document medical or facility records; and/or,
    c. falsified one or more Controlled Substance Receipt Records.
4. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99(b), including but not limited to:
    a. §20-99(b)(2); and/or
    b. §20-99(b)(6).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke or order other disciplinary action against respondent's nursing license as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 20th day of April, 2020.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

SUMMARY SUSPENSION COVER SHEET

In Re: Sara Smith, RN Petition No. 2020-373

1. Sara Smith of Shelton, Connecticut (hereinafter "respondent") graduated from St. Vincent's college and was licensed to practice nursing in 2017. She has not been previously disciplined.
2. On or about September 18, 2019, the Connecticut Board of Examiners for Nursing (hereinafter "the Board") ordered a Consent Order in Petition No. 2020-443 ("Order") based upon respondent's abuse of controlled substances. The Order placed respondent's license on probation for four years and required her, in part, to submit to random urine screens which shall be negative for the presence of drugs and alcohol.
3. On or about March 3, 2020, respondent tested positive for and/or abused or utilized to excess oxymorphone and/or propoxyphene.
4. On or about April 14, 2020, respondent tested positive for and/or abused or utilized to excess oxymorphone.
5. For the foregoing reasons, the Department believes that respondent's continued nursing practice represents a clear and immediate danger to the public health and safety. The Department respectfully requests that the Board summarily suspend respondent's nursing license until a full hearing on the merits can be held.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Sara Smith, RN Petition No. 2020-373

MOTION FOR SUMMARY SUSPENSION

The Department of Public Health (hereinafter "the Department") hereby moves in accordance with Connecticut General Statutes §§4-182(c) and 19a-17(c) that the Connecticut Board of Examiners for Nursing summarily suspend Sara Smith's nursing license in Connecticut. This motion is based on the attached Statement of Charges, Affidavits and on the Department's information and belief that Sara Smith's continued nursing practice represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 30th day of April, 2020.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Sara Smith, RN Petition No. 2020-373

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Sara Smith:

1. Sara Smith of Shelton, Connecticut (hereinafter "respondent") is the holder of Connecticut registered nursing license number 122048.
2. On or about September 18, 2019, the Connecticut Board of Examiners for Nursing (hereinafter "the Board") ordered a Consent Order in Petition No. 2020-443 ("Order") based upon respondent's abuse of controlled substances. The Order placed respondent's license on probation for four years and required her, in part, to submit to random urine screens which shall be negative for the presence of drugs and alcohol.
3. On or about March 3, 2020, respondent tested positive for and/or abused or utilized to excess oxymorphone and/or propoxyphene.
4. On or about April 14, 2020, respondent tested positive for and/or abused or utilized to excess oxymorphone and/or oxycodone.
5. Respondent's conduct as described s constitutes violations of the terms of \ probation required by the Order and subjects her license to revocation or other disciplinary action authorized by Connecticut General Statutes §§19a-17 and 20-99(b) including but not limited to §20-99(b)(2) and/or §20-99(b)(5).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke or order other disciplinary action against respondent's nursing license as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 30th day of April, 2020.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

PREHEARING REVIEW COVER SHEET

Stephen Keller, R.N.

Petition No.: 2017-1112

1. Steven Keller of Killingworth, Connecticut (hereinafter "respondent") was issued license number 124643 on February 10, 2015 to practice as a registered nurse.

2. Respondent graduated from Three Rivers Community College in 2014.

3. At all relevant times, respondent was employed as a Forensic Nurse at Whiting Forensic Hospital, located on the campus of Connecticut Valley Hospital in Middletown, Connecticut.

4. On or about March 16, 2017, respondent failed to meet the standard of care in one or more of the following ways:

   a. he failed to intervene and/or report to his nursing supervisor when he observed staff members physically abusing Patient #1 and/or failing to follow the plan of care for Patient #1;

   b. he failed to follow the plan of care for Patient #1 which required that he and another male staff member maintain constant observation of Patient #1.

5. Respondent has no history of disciplinary actions.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Sashni Popp, R.N. Petition No. 2018-530

CONSENT ORDER

WHEREAS, Sashni Popp (hereinafter "respondent") of Norwalk, Connecticut, has been issued license number 112532 to practice as a registered nurse by the Connecticut Department of Public Health (hereinafter "the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent hereby admits and acknowledges that:

1. On or about February 1, 2018 and February 11, 2018, while employed by Family Care Visiting Nurse and Home Care Agency, L.L.C. in Stratford, Connecticut, respondent provided home care to Patient #1, whose medical history included heart failure, hypertension, insulin dependent diabetes mellitus, cellulitis of the lower right extremity and peripheral vascular disease.
2. Respondent's care of Patient #1 failed to meet the standard of care when she:
   a. Failed to communicate to Patient #1's physician that Patient #1 needed increased home nursing visits to evaluate and treat Patient #1's stage II open sacral wound;
   b. Failed to document the condition of the skin around Patient's #1's wound, the position of the wound and treatments being used or suggested;
   c. Failed to implement any preventative measures for further breakdown of Patient #1's skin;
   d. Failed to educate Patient #1 and Patient#1's caregivers on wound care and preventative measures for further skin breakdown, and failed to document that Patient #1 did not speak English; and/or

e. Failed to assess Patient #1's lower extremities during the second visit.

3. The above-described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to §20-99(b)(2).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above-admitted violation(s) or allegation(s) at a hearing before the Board of Examiners for Nursing (hereinafter "the Board"). Respondent agrees that for the purpose of this or any future proceedings before the Board this Consent Order shall have the same effect as if ordered after a full hearing pursuant to §§19a-9, 19a-10, and 20-99(a) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations applicable to respondent's profession.
3. Respondent's license number 112532 to practice as a registered nurse in the State of Connecticut is hereby reprimanded.
4. Respondent's license number 112532 to practice as a registered nurse in the State of Connecticut is hereby placed on probation for one year, subject to the following terms and conditions:

   A. Within the first six months of the probationary period, respondent shall attend and successfully complete coursework in wound management, documentation standards, patient communication, and professional ethics, pre-approved by the Department. Within two weeks of the completion of such coursework, respondent shall provide the

Department with proof, to the Department's satisfaction, of the successful completion of such courses.

B. Respondent shall not be employed as a nurse for a personnel provider service, assisted living services agency, homemaker - home health aide agency, or home health care agency, and shall not be self-employed as a nurse for the period of probation.

C. Respondent shall be responsible for the provision of quarterly written reports directly to the Department from respondent's nursing supervisor (i.e., Director of Nursing) monthly for the entire probationary period. Respondent shall provide a copy of this Consent Order to any and all employers if employed as a nurse during the probationary period. The Department shall be notified in writing by any employer(s) within fifteen (15) days of the commencement of employment as to the receipt of a copy of this Consent Order. Employer reports shall include documentation of respondent's ability to safely and competently practice nursing, and shall be issued to the Department at the address cited in paragraph 4H below. A report indicating that respondent is not practicing with reasonable skill and safety shall be deemed to be a violation of this Consent Order.

D. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.

E. Respondent shall notify the Department of any change in respondent's home or business address within fifteen (15) days of such change.

F. If respondent pursues further training or is engaged at the time of the implementation of the Consent Order, in an educational program in any subject area that is regulated by the Department, respondent shall provide a copy of this Consent Order to the educational

institution or, if not an institution, to respondent's instructor. Such institution or instructor shall notify the Department of receipt of the Consent Order within fifteen (15) days of receipt.

G. All reports required by the terms of this Consent Order shall be due according to a schedule to be established by the Department of Public Health.

H. All correspondence and reports shall be addressed to:

Lavita Sookram, R.N., Nurse Consultant
Practitioner Compliance and Monitoring Unit
Department of Public Health
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308

5. Any violation of the terms of this Consent Order without prior written approval by the Department shall constitute grounds for the Department to seek revocation of respondent's nursing license following notice and an opportunity to be heard. Respondent shall pay all costs necessary to comply with this Consent Order.

6. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to take action at a later time. The Department shall not be required to grant future extensions of time or grace periods.

7. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.

8. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.

9. Respondent understands this Consent Order is a matter of public record.

10. Respondent understands and agrees that this Consent Order shall be deemed as evidence of the above-admitted violations in any proceeding before the Board in which (1) respondent's compliance with this same Consent Order is at issue, or (2) respondent's compliance with §20-99(b) of the General Statutes of Connecticut, as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank maintained by the United States Department of Health and Human Services.

11. In the event respondent violates a term of this Consent Order, respondent agrees immediately to refrain from practicing as a nurse, upon request by the Department, for a period not to exceed 45 days. During that time period, respondent further agrees to cooperate with the Department in its investigation of the violation, and to submit to and complete a medical, psychiatric or psychological evaluation, if requested to do so by the Department; and, that the results of the evaluation shall be submitted directly to the Department. Respondent further agrees that failure to cooperate with the Department in its investigation during said 45 day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that failure to cooperate with the Department's investigation shall be considered by the Board and shall be given due weight by the Board in determining whether respondent's conduct constitutes a clear and immediate danger as required pursuant to Connecticut General Statutes, sections 4-182(c) and 19a-17(c). The Department and respondent understand that the Board has complete and final discretion as to whether a summary suspension is ordered.

12. In the event respondent does not practice as a registered nurse for periods of thirty (30) consecutive days or longer, respondent shall notify the Department in writing. Such periods of

times shall not be counted in reducing the probationary period covered by this Consent Order and such terms shall be held in abeyance. During such time period, respondent shall not be responsible for complying with the terms of probation of this Consent Order. In the event respondent resumes the practice of registered nursing, respondent shall provide the Department with thirty (30) days prior written notice. Respondent shall not return to the practice of registered nursing without written pre-approval from the Department. Respondent agrees that the Department, in its complete discretion, may require additional documentation from respondent and/or require respondent to satisfy other conditions or terms as a condition precedent to respondent's return to practice. If requested to do so by the Department, respondent further agrees to complete the following:

a. attend and successfully complete coursework, remediation, and/or retraining pre-approved by the Department. Upon completion, respondent shall provide the Department with proof, to the Department's satisfaction, of successful completion.

Respondent agrees that any return to the practice of registered nursing without pre-approval from the Department shall constitute a violation of this Consent Order and may subject the respondent to further disciplinary action.

13. If, during the period of probation, respondent practices nursing outside Connecticut, respondent shall provide written notice to the Department concerning such practice. During such time period, respondent shall not be responsible for complying with the terms of probation of this Consent Order, and such time period shall not be counted in reducing the probationary period covered by this Consent Order. Respondent may comply with the terms of probation while practicing outside Connecticut if pre-approved by the Department. In the event respondent intends to return to the practice of nursing in Connecticut, respondent shall

provide the Department with thirty (30) days prior written notice and agrees to comply with all terms and conditions contained in paragraph 4 above.

14. In the event respondent violates any term of this Consent Order, said violation may also constitute grounds for the Department to seek a summary suspension of respondent's license before the Board.

15. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent Order shall not be subject to modification as a result of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to §4-181a of the General Statutes of Connecticut without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that respondent may have under the laws of the State of Connecticut or of the United States.

16. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Board. The Department and respondent agree that the Board has complete and final discretion as to whether an executed Consent Order is approved or accepted. Respondent hereby waives any claim of error that could be raised that is related to or arises during the course of the Board's discussions regarding whether to approve or reject this Consent Order and/or a Board member's participation during this process,

through the Board member's review or comments, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision and/or final decision by the Board.

17. This Consent Order is a revocable offer of settlement, which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.

18. Respondent has had the opportunity to consult with an attorney prior to signing this document.

19. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only, and is not intended to affect any civil or criminal liability or defense.

20. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

*

*

*

I, Sashni Popp, have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Sashni Popp, R.N.

Subscribed and sworn to before me this 3rd day of March, 2020.

Lilian Brown
Notary Public-Connecticut
My Commission Expires
June 30, 2024

Notary Public or person authorized
by law to administer an oath or affirmation

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 10th day of March, 2020, it is hereby accepted.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the _____ day of _____, 2020, it is hereby ordered and accepted.

BY: _____
Connecticut Board of Examiners for Nursing

CONSENT ORDER COVER SHEET

Sara Scobie, L.P.N. Petition No.: 2018-1365

1. Sara Scobie of Milford, Connecticut (hereinafter "respondent") was issued license number 040280 on July 5, 2016 to practice as a licensed practical nurse.
2. Respondent graduated from Lincoln Technical Institute, Shelton, CT in June, 2016.
3. At all relevant times, respondent was employed as a licensed practical nurse by All Pointe HomeCare, located in Cheshire, Connecticut.
4. On February 17, 2018, while working as a licensed practical nurse and providing homecare to Patient #1, a medically compromised child, respondent:
    a. Took photographs of Patient #1 without consent of the patient or family;
    b. Shared a photograph of Patient #1 with an acquaintance; and/or
    c. Disclosed details of the patient's personal and clinical information to an acquaintance.
5. On February 18, 2018, while working as a licensed practical nurse and providing homecare to Patient #2, a medically compromised child, respondent:
    a. Took photographs of patient #2 without consent of the patient or family; and/or
    b. Shared a photograph of patient #2 with an acquaintance.
6. Respondent has no history of disciplinary actions.
7. The proposed Consent Order requires a reprimand. Respondent has completed coursework in patient confidentiality and professional ethics. Respondent and the Department respectfully request that the Board of Examiners for Nursing approve and accept this Consent Order.

PREHEARING REVIEW AGREEMENT

I, Sara Scobie, the undersigned, do hereby permit any conversation which is necessary between the Office of Legal Compliance of the Healthcare Quality and Safety Branch Connecticut Department of Public Health, and the Connecticut Board of Examiners for Nursing (hereinafter"the Board"), or any member thereof, for the purpose of discussing the possibility of obtaining a Consent Order.

I understand that the Board has complete and final discretion as to whether or not a Consent Order is approved and granted, and that, if said order is granted, it is not subject to reconsideration or judicial review under any form or in any forum.

I agree that the Board may review and examine any or all documents and/or facts relative to the case against me when considering whether to accept or reject the Consent Order. If the Board rejects the Consent Order, I agree that the case against me will proceed to formal hearing before the Board. Therefore, it is agreed that the review of documents or facts cited above shall not unfairly or illegally prejudice the Board or any members thereof from participating in a formal hearing against me. I hereby waive any right I may have to challenge the composition of the Board from participating in the formal hearing against me based on the review the documents and/or facts cited above by the Board.

I further acknowledge that I have the right to consult with an attorney before signing this document.

Sara Scobie

Sara Scobie, L.P.N.

Sworn and subscribed to before me this 7th day of April 2020

at Southington, Connecticut, via Remote Notarization per Executive Order 7Q.

Karen A. Sposi

Notary Public Karen A. Sposi

~~Commissioner of the Superior Court~~

My commission expires: Jan. 31, 2022.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Sara Scobie, L.P.N. Petition No. 2018-1365

CONSENT ORDER

WHEREAS, Sara Scobie (hereinafter "respondent") of Milford, Connecticut, has been issued license number 040280 to practice as a licensed practical nurse by the Connecticut Department of Public Health (hereinafter "the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, the Department alleges that:

1. At all relevant times, respondent was employed as a licensed practical nurse by All Pointe HomeCare, located in Cheshire, Connecticut.

2. On or about February 17, 2018, while working as a licensed practical nurse and providing homecare to Patient #1, a medically compromised child, respondent:

   a. Took photographs of Patient #1 without consent of the patient or family;
   b. Shared a photograph of Patient #1 with an acquaintance; and/or
   c. Disclosed details of the patient's personal and clinical information to an acquaintance.

3. On or about February 18, 2018, while working as a licensed practical nurse and providing homecare to Patient #2, a medically compromised child, respondent:

   a. Took photographs of Patient #2 without consent of the patient or family; and/or
   b. Shared a photograph of Patient #2 with an acquaintance.

4. The above-described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to §20-99(b)(2).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above allegations of wrongdoing, but while admitting no guilt or wrongdoing, agrees that for the purpose of this or any future proceedings before the Board of Examiners for Nursing (hereinafter "the Board"), this Consent Order shall have the same effect as if ordered after a full hearing pursuant to §§19a-9, 19a-10, and 20-99(a) of the General Statutes of Connecticut.

WHEREAS, respondent has completed coursework in patient confidentiality and professional ethics.

NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations applicable to respondent's profession.
3. Respondent's license number 040280 to practice as a nurse in the State of Connecticut is hereby reprimanded.
4. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.
5. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.

6. Respondent understands and agrees that this Consent Order shall be deemed a public document, and the Department's allegations as contained in this Consent Order shall be deemed true in any subsequent proceeding before the Board in which (1) respondent's compliance with this same Consent Order is at issue, or (2) respondent's compliance with §20-99(b) of the General Statutes of Connecticut, as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank maintained by the United States Department of Health and Human Services.

7. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent Order shall not be subject to modification as a result of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to §4-181a of the General Statutes of Connecticut without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that respondent may have under the laws of the State of Connecticut or of the United States.

8. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Board. The Department and respondent agree that the Board has complete and final discretion as to whether an executed Consent Order is

approved or accepted. Respondent hereby waives any claim of error that could be raised that is related to or arises during the course of the Board's discussions regarding whether to approve or reject this Consent Order and/or a Board member's participation during this process, through the Board member's review or comments, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision and/or final decision by the Board.

9. This Consent Order is a revocable offer of settlement, which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.

10. Respondent has had the opportunity to consult with an attorney prior to signing this document.

11. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only, and is not intended to affect any civil or criminal liability or defense.

12. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

*

I, Sara Scobie, have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Sara Scobie, L.P.N.

Subscribed and sworn to before me this 7th day of April, 2020.
via Remote Notorization per Executive Order 7Q.

Notary Public or person authorized by law to administer an oath or affirmation
Karen A Spost
my Commission Expires Jan. 31, 2022

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 11th day of May, 2020, it is hereby accepted.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the _____ day of _____, 2020, it is hereby ordered and accepted.

BY: _____
Connecticut Board of Examiners for Nursing

CERTIFICATION

I, James Augustyn, Special Investgiator, Practitioner Licensing and Investigations Section, Department of Public Health, being duly sworn, hereby attest that I have prepared and reviewed this report and it is a true, complete and accurate documentation of my investigation of Sara Scobie, LPN, professional license number: 11.040280.

James Augustyn, Special Investigator
Department of Public Health
Practitioner Licensing and Investigations Section

Subscribed and sworn to before me this 13th day of August 2019.

Notary Public
My Commission Expires 10-31-22

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH
Commissioner

Ned Lamont
Governor

Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

March 12, 2020

Colleen Gallagher
160 Walnut Street
Stratford, CT 06615

Service by State Marshal
First Class Mail
Via EMAIL (colleengallaghre71@icloud.com)

5 Knollwood Drive
New ton, CT 06470

Linda Fazzina, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Colleen Gallagher, LPN - Petition No. 2020-76

NOTICE OF RESCHEDULED HEARING

The hearing in the above referenced matter, is rescheduled to May 20, 2020.

The hearing will held by telephone conference from the Department of Public Health, 410 Capitol Avenue, Hartford, Connecticut, in the third floor Hearing Room, beginning at 9:30 a.m.

The call in number for the hearing is 1-877-653-5974. The passcode is 10619990

FOR: BOARD OF EXAMINERS FOR NURSING

BY: _____
Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
PO Box 340308
Hartford, CT 06134-0308
Tel. (860) 509-7566 FAX (860) 707-1904

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Colleen Gallagher, LPN **Petition No. 2020-76**

SUMMARY SUSPENSION ORDER

WHEREAS, the Department of Public Health having moved for an order of summary suspension in this matter and having submitted duly verified affidavits in support of its motion; and

WHEREAS, said affidavits allege facts which show violations of §20-99(b) of the Connecticut General Statutes, and which imperatively require emergency action in that the public health, safety or welfare of the citizens of the State of Connecticut is in clear and immediate danger.

NOW, THEREFORE, pursuant to §4-182(c) and §19a-17(c) of the Connecticut General Statutes, it is hereby **ORDERED,** by vote of the Board of Examiners for Nursing:

1. That license number 027133 of **Colleen Gallagher,** to practice as a licensed practical nurse in the State of Connecticut is hereby summarily suspended pending a final determination by the Board of Examiners for Nursing regarding the allegations contained in the Statement of Charges, and

2. That said license shall be ***immediately surrendered*** to the Department of Public Health, Public Health Hearing Office, 410 Capitol Avenue, MS#13PHO, P.O. Box 340308, Hartford, CT 06134-0308 upon notification of this Order, and

3. That a hearing in this matter is scheduled for the 15th day of April 2020, at 9:00 a.m., at the Department of Public Health Complex, Room 470-A/B, 470 Capitol Avenue, Hartford, CT.

Dated at Hartford, Connecticut this 18th day of March, 2020.

Patricia C. Bouffard, D.N.Sc., RN, Chair
Connecticut Board of Examiners for Nursing

STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING

Colleen Galagher
160 Walnut Street
Stratford, CT 06615

25 Reitter Street
Stratford, CT 06615

Service by State Marshal
First Class Mail
Via EMAIL (colleengallaghre71@icloud.com)

RE: Colleen Galagher, LPN - Petition No. 2020-76

NOTICE OF HEARING

By authority of the General Statutes of Connecticut, Section 4-177, you are hereby notified to appear before the Board of Examiners for Nursing for a hearing on the attached Charges against you at 9:00 AM at the Department of Public Health Complex, Conference Room A/B, 410-470 Capitol Avenue, Hartford, Connecticut on April 15, 2020. The scheduling of your case is subject to change. You are urged to call 860-509-7566 the day before the hearing to verify this schedule.

These Charges are being brought against you under the provisions of the Sections 19a-9, 19a-10 and 20-99(b) of the Connecticut General Statutes. The hearing will be conducted in accordance with Chapter 54 of the General Statutes of Connecticut and Section 19a-9-1, et seq., of the Regulations of Connecticut State Agencies (Public Health Code).

At the hearing you will have the opportunity to present your evidence, including witnesses and documents. It is your responsibility to bring the witnesses and documents you wish to present at the hearing.

Filing an Answer; Failure to File Answer:

You are required to file an answer to the attached Charges with the Department of Public Health *within 14 days from the date of this Notice of Hearing. Please note: failure to file an Answer could result in the allegations being found to be true as stated, and the possibility that you will not be permitted to submit any evidence concerning the allegations.*

Representation by an Attorney:

At the aforementioned hearing you may be represented by an attorney and present evidence on your behalf. Although you may represent yourself (pro se), you are urged to obtain the services of an attorney.

Documents:

If you intend to introduce documents into evidence, YOU MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

All documents that you wish to present at the hearing must be paginated and must have certain information redacted. That means, that certain information, must be blacked out as follows:

a. First, make a photocopy of the original document. DO NOT MARK THE ORIGINAL IN ANY WAY.
b. Secondly, if any of the following information appears on any page of the document, *on the photocopy*, black out the following information using a black marker:
   (1) Date of birth
   (2) Mother's maiden name
   (3) Motor vehicle operator's license number
   (4) Social Security Number
   (5) Other government-issued identification number
   (6) Health insurance identification number
   (7) Financial account number
   (8) Security code or personal identification number (PIN)

c. Next, paginate each document in the lower right hand corner of each page *of the redacted photocopy*.
d. Finally, any documentation offered into evidence must be accompanied by (9) photocopies of the redacted and paginated copy to provide to the Board and the Department at the hearing.
e. Please note: you must also bring the original to the hearing.

Failure to Appear:

If you fail to appear at the hearing, upon proof that due notice was served upon you to appear, the Board may proceed in the same manner as though you were present in person. The Board may hold a fact-finding meeting immediately following the close of the record.

Order Re: Filings

The Department and Respondent are hereby ordered when submitting any pleadings, documents, motions or other papers to the Board to file an original plus nine (9) copies with Jeffrey A. Kardys, agent of the Board and custodian of the record, at the following address:

Department of Public Health
Public Health Hearing Office
410 Capitol Avenue, MS#13PHO
P. O. Box 340308
Hartford CT 06134-0308

All communications to the Board shall be submitted in this fashion. The Department or Respondent shall provide a copy of each document filed to Respondent or Department as the case may be and certify such to the Board.

Please call 860-509-7566 as soon as possible if you have any questions about the hearing schedule.

Dated at Hartford, Connecticut this 9th day of March, 2020.

For the Connecticut Board of Examiners for Nursing

Jeffrey A. Kardys, Administrative Hearings Specialist

c: Henry Salton, Assistant Attorney General
Christian Andresen, Section Chief, Practitioner Licensing and Investigations
Linda Fazzina, Staff Attorney, Office of Legal Compliance

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Colleen Gallagher, LPN Petition No. 2020-76

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Colleen Gallagher:

FIRST COUNT

1. Colleen Gallagher of Stratford, Connecticut (hereinafter "respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut licensed practical nurse license number 027133.

2. In or about September 2019, respondent was diagnosed with cannabis use disorder and/or a mental illness.

3. In or about September 2019, respondent abused or utilized to excess methadone and/or marijuana.

4. Respondent's cannabis use disorder and/or mental illness and/or respondent's abuse and/or excess use of methadone and/or marijuana does, and/or may, affect her practice as a nurse.

5. The above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99, including but not limited to:

    a. §20-99(b)(4); and/or
    b. §20-99(b)(5).

SECOND COUNT

6. Paragraph 1 is incorporated herein by reference as if set forth in full.

7. At all relevant times, respondent was employed as a nurse at Cambridge Manor in Fairfield, Connecticut (hereinafter "Cambridge Manor").

8. On one or more occasions in 2019, while as a nurse at Cambridge Manor, respondent failed to completely, properly and/or accurately document medical records in connection with the administration of a controlled substance to one or more residents.

9. The above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including, but not limited to §20-99(b)(2).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by the General Statutes of Connecticut, §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Colleen Gallagher as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 11th day of March 2020.

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

soc2

Richard A. Orr
State Marshal
County of Fairfield

40 Woodlawn Road
Monroe, CT 06468
(203) 268-5745 Home
(203) 556-1040 Cell Phone

RETURN OF SERVICE – NOTICE of RESCHEDULED HEARING

State of Connecticut

SS: Newtown and Stratford **April 28th, 2020**

County of Fairfield

Then and there, by virtue hereof, I made service of the within and foregoing original Notice of Rescheduled Hearing, Summary Suspension Order, Notice of Hearing, and Statement of Charges upon the within-named respondent- Colleen Gallagher by leaving a verified true and attested copy of the Notice of Rescheduled Hearing, Summary Suspension Order, Notice of Hearing, and Statement of Charges with my doings thereon endorsed at the indicated alleged place of abode of Colleen Gallagher at **5 Knollwood Drive, Newtown**

Later, the same day, I made further service upon the within-named respondent- Colleen Gallagher by leaving another such verified true and attested copy of the Notice of Rescheduled Hearing, Summary Suspension Order, Notice of Hearing, and Statement of Charges at the second alleged abode of Collen Gallagher at **160 Walnut Street, Stratford**

The within and foregoing is the original Notice of Rescheduled Hearing, Summary Suspension Order, Notice of Hearing, and Statement of Charges with my doings hereon endorsed.

ATTEST:

RICHARD A. ORR
State Marshal
County of Fairfield

FEES:

Services----------$ 80.00
Travel-round trip- 13.14 (Newtown)
Travel-round trip-- 19.09 (Stratford)
Copies---------- 12.00
Endorsements--- .80

TOTAL -------$ 125.03

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Karina Francis, RN **Petition No. 2020-157**

SUMMARY SUSPENSION ORDER

WHEREAS, the Department of Public Health having moved for an order of summary suspension in this matter and having submitted duly verified affidavits in support of its motion; and

WHEREAS, said affidavits allege facts which show violations of §20-99(b) of the Connecticut General Statutes, and which imperatively require emergency action in that the public health, safety or welfare of the citizens of the State of Connecticut is in clear and immediate danger.

NOW, THEREFORE, pursuant to §4-182(c) and §19a-17(c) of the Connecticut General Statutes, it is hereby **ORDERED,** by vote of the Board of Examiners for Nursing:

4. That license number 084101 of **Karina Francis,** to practice as a registered nurse in the State of Connecticut is hereby summarily suspended pending a final determination by the Board of Examiners for Nursing regarding the allegations contained in the Statement of Charges, and

5. That said license shall be ***immediately surrendered*** to the Department of Public Health, Public Health Hearing Office, 410 Capitol Avenue, MS#13PHO, P.O. Box 340308, Hartford, CT 06134-0308 upon notification of this Order, and

6. That a hearing in this matter is scheduled for the 15th day of April 2020, at 9:00 a.m., at the Department of Public Health Complex, Room 470-A/B, 470 Capitol Avenue, Hartford, CT.

Dated at Hartford, Connecticut this 18th day of March, 2020.

Patricia C Bouffard D.N.Sc.

Patricia C. Bouffard, D.N.Sc., RN, Chair
Connecticut Board of Examiners for Nursing

STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING

Karina C. Francis
2A Westchester Hills
Colchester, CT 06415

Service by State Marshal
and First Class Mail
and Via Email (kfrancis033@yahoo.com

RE: Karina C. Francis, RN - Petition No. 2020-157

NOTICE OF HEARING

By authority of the General Statutes of Connecticut, Section 4-177, you are hereby notified to appear before the Board of Examiners for Nursing for a hearing on the attached Charges against you at 9:00 AM at the Department of Public Health Complex, Conference Room A/B, 410-470 Capitol Avenue, Hartford, Connecticut on April 15, 2020. The scheduling of your case is subject to change. You are urged to call 860-509-7566 the day before the hearing to verify this schedule.

These Charges are being brought against you under the provisions of the Sections 19a-9, 19a-10 and 20-99(b) of the Connecticut General Statutes. The hearing will be conducted in accordance with Chapter 54 of the General Statutes of Connecticut and Section 19a-9-1, et seq., of the Regulations of Connecticut State Agencies (Public Health Code).

At the hearing you will have the opportunity to present your evidence, including witnesses and documents. It is your responsibility to bring the witnesses and documents you wish to present at the hearing.

Filing an Answer; Failure to File Answer:

You are required to file an answer to the attached Charges with the Department of Public Health *within 14 days from the date of this Notice of Hearing. Please note: failure to file an Answer could result in the allegations being found to be true as stated, and the possibility that you will not be permitted to submit any evidence concerning the allegations.*

Representation by an Attorney:

At the aforementioned hearing you may be represented by an attorney and present evidence on your behalf. Although you may represent yourself (pro se), you are urged to obtain the services of an attorney.

Documents:

If you intend to introduce documents into evidence, YOU MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

All documents that you wish to present at the hearing must be paginated and must have certain information redacted. That means, that certain information, must be blacked out as follows:

a. First, make a photocopy of the original document. DO NOT MARK THE ORIGINAL IN ANY WAY.
b. Secondly, if any of the following information appears on any page of the document, *on the photocopy*, black out the following information using a black marker:
   (1) Date of birth
   (2) Mother's maiden name
   (3) Motor vehicle operator's license number
   (4) Social Security Number
   (5) Other government-issued identification number
   (6) Health insurance identification number
   (7) Financial account number
   (8) Security code or personal identification number (PIN)

c. Next, paginate each document in the lower right hand corner of each page *of the redacted photocopy.*
d. Finally, any documentation offered into evidence must be accompanied by (9) photocopies of the redacted and paginated copy to provide to the Board and the Department at the hearing.
e. Please note: you must also bring the original to the hearing.

Failure to Appear:

If you fail to appear at the hearing, upon proof that due notice was served upon you to appear, the Board may proceed in the same manner as though you were present in person. The Board may hold a fact-finding meeting immediately following the close of the record.

Order Re: Filings

The Department and Respondent are hereby ordered when submitting any pleadings, documents, motions or other papers to the Board to file an original plus nine (9) copies with Jeffrey A. Kardys, agent of the Board and custodian of the record, at the following address:

Department of Public Health
Public Health Hearing Office
410 Capitol Avenue, MS#13PHO
P. O. Box 340308
Hartford CT 06134-0308

All communications to the Board shall be submitted in this fashion. The Department or Respondent shall provide a copy of each document filed to Respondent or Department as the case may be and certify such to the Board.

Please call 860-509-7566 as soon as possible if you have any questions about the hearing schedule.

Dated at Hartford, Connecticut this 19th day of March, 2020.

For the Connecticut Board of Examiners for Nursing

Jeffrey A. Kardys, Administrative Hearings Specialist

c: Henry Salton, Assistant Attorney General
Christian Andresen, Section Chief, Practitioner Licensing and Investigations
Brittany Allen, Staff Attorney, Office of Legal Compliance

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Karina Francis, R.N. Petition No. 2020-157

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Karina Francis:

1. Karina Francis of Colchester, Connecticut (hereinafter "respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut registered nursing license number 084101.

2. On or about November 20, 2019, the Connecticut Board of Examiners for Nursing approved a Consent Order in Petition Number 2019-845 ("Consent Order") that placed respondent's license on probation for four (4) years with concurrent six (6) month suspension. Such disciplinary action was based upon respondent's abuse and/or utilization to excess of controlled substances.

3. Said Consent Order specifically provides, in part, that respondent shall submit to random urine screens for the presence of alcohol and drugs. In addition, the Consent Order provides that respondent shall engage in therapy with a licensed therapist approved by the Department.

4. Respondent failed to engage in therapy with an approved therapist.

5. Respondent failed to submit to random urine screens.

6. Respondent's abuse and/or utilization to excess of controlled substances does, and/or may, affect her practice as a nurse.

7. Respondent's conduct as described above constitutes a violation of the terms of probation as set forth in the Consent Order, and subjects respondent's license to revocation or other disciplinary action authorized by the General Statutes of Connecticut, §§19a-17 and 20-99(b).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by the General Statutes of Connecticut, §§20-99(b) and 19a-17, revoke or order other disciplinary action against the nursing license of Karina Francis as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 9th day of March 2020.

Christian D. Andresen, MPH, Section Chief
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

April 13, 2020

Karina Francis **VIA EMAIL ONLY (kfrancis033@yahoo.com)**
2A Westchester Hills
Colchester, CT 06415

Brittany Allen, Staff Attorney **VIA EMAIL ONLY**
Department of Public Health
410 Capitol Avenue, MS #12LEG PO
Box 340308
Hartford, CT 06134-0308

RE: Karina Francis, RN - Petition No. 2020-157

RULING ON REQUEST FOR CONTINUANCE

Respondent emailed the Board office on April 9, 2020, requesting a continuance of the hearing scheduled for April 15, 2020. Without objection from the Department of Public Health, respondent's request is granted.

The hearing has been rescheduled for Wednesday, May 20, 2020, at 9:00 a.m. at the Department of Public Health Complex, 470 Capitol Avenue, Hartford, Connecticut in conference room 470-A/B.

The Summary Suspension of respondent's registered nurse license remains in effect.

FOR: BOARD OF EXAMINERS FOR NURSING

BY: /Jeffrey A. Kardys/

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