

BOEN meeting 06/17/2020

- **Central Connecticut State University (CCSU):**

CCSU is requesting that **Dr. Catherine Thomas** be approved for the position of Chairperson of the Nursing Department as of 09/01/2020, she had previously been approved by the BOEN and is serving as Interim Department Chair as of 01/01/2020. Dr. Thomas earned a Bachelor of Science in Nursing from the University of Saint Joseph in May of 1991, a Master of Science in Nursing from the University of Hartford in May of 1998 and a Doctor of Nursing Practice, Education concentration from Regis College in August 2014. Her educational experiences include full time Assistant Nursing Professor at CCSU since August 2012 and Interim Department Chair for the 2017-2018 academic year, Associate Nursing Professor at Goodwin College from 01/2007 to 05/2012 and an adjunct clinical nursing instructor from 09/2005 to 01/2007 and a clinical nursing instructor at Three Rivers Community College from 09/1998 to 05/2000. Her clinical experience includes critical care, clinical educator and clinical nurse specialist in various hospitals, staff development in various long-term care facilities and camp nursing.

- **Norwalk Community College:**

Norwalk Community College is requesting that **Dr. Ezechiel Dominique** be approved as the Director of Nursing & Allied Health as of 06/05/2020. Dr. Dominique earned an Associate Degree in Nursing from St. Vincent's College in May of 2007, a Master of Science in Nursing, Health Care Systems Management from Loyola University New Orleans in May of 2015 and a Doctor of Nursing Practice, Executive Leadership from Loyola University New Orleans in May of 2017. His educational experiences include instructor at Stone Academy in the Practical Nursing program from 11/2017 to 01/2019 and Assistant Professor at Norwalk Community College from 01/2019 to present (classroom and clinical settings). His clinical experiences include staff nurse in a hospital Emergency Department, nurse supervisor at a long-term care facility and nurse manager of a hospice program.

- **University of Connecticut, CEIN Stamford campus, Plan of Correction for NCLEX results (78%):**

Data identified: one candidate graduated in 12/2018, 5 of 6 candidates had cumulative Grade Pont Averages (GPA) of 3.01 to 3. 12 and all candidates had difficulty with the standardized testing throughout the program.

Plan:

1. Faculty will work closely with their assigned advisee (s).
2. Monitor benchmarks on all proctored Assessment Technologies Institute (ATI) exams each semester, require remediation & reviews for all missed exam questions for ATI

Practice B & proctored exams, each student to take 2 versions of the ATI predictor exam during the final semester with remediation before taking the subsequent exam and if a student earns a score of less than 85 % on their second attempt have that student complete 3 day comprehensive ATI review course then complete a third ATI predictor exam.

3. Make available ATI practice exams and ATI BoardVitals available at program completion for ongoing NCLEX preparation.
4. Integrate assigned & student created ATI BoardVitals adaptive testing throughout the final semester.
5. Encourage all graduates to take the NCLEX within 4-6 weeks of graduation and encourage an additional review course if they do not anticipate taking the NCKEX within this recommended time frame.
6. Offer remediation and support to candidates who have not taken the NCLEX within 3 months of graduation.

- **Stone Academy:**

1. **Plan of Correction for NCLEX results (East Hartford days 73% and West Haven day 48%):**

Plan focuses on two key areas-Policy and Academics.

- a. Policy: the final course of the Practical Nursing program, Seminar 111 has been modified to include integration of the Virtual Assessment Technologies Institute (V-ATI) program.
- b. Academics: weekly reports for each student that may be at risk with an action plan and instructor follow up, uniformity in the curriculum across each campus, use of adaptive quizzing and Silvestri's NCLEX- PN review book starting in the fundamental courses.

To address access to proctored exams during distance learning, a remote proctoring service was purchased.

Use of proctored ATI exams with remediation.

Restructure the gap between clinical and the exit exam (from 16 to 4 weeks).

Additional faculty for the classroom and clinical settings, faculty mentors, Clinical Supervisor and an Assistant Programs Manager.

2. **Request for providing an alternative clinical experience for select students on selected campuses.**

- a. Request that 25 % of the clinical experience hours be offered to select students at the Waterbury campus both day & evening programs, West Haven campus two evening cohorts and the East Hartford campus two evening cohorts.
- b. The students currently use technology as a teaching strategy to meet course objectives and learning outcomes.
- c. Appendix A provides an overview of the plan for a virtual clinical experience including learning outcomes, pre-clinical assignments, tasks during the scenario,

debriefing and assignments.

- **Porter & Chester Institute (PCI)**

1. **Plan of Correction for NCLEX results (Hamden days 63% & evening 50%, Rocky Hill days 70% & evening 71% and Stratford evening 77%).**

- a. PCI has submitted a request for candidate corrections which will impact the Rocky Hill campus day & evening and the Stratford campus day & evening test results.

Please note: to date, NCSBN has not made any corrections.

- b. A request to the BOEN to have one program code for the Practical Nursing program at PCI. In reviewing the collective outcome for all sections and all campuses for PCI the result would be 83%. Please refer to Exhibit 1.

Please note: this topic was discussed by the BOEN on 06/19/2019 as requested by Stone Academy. Refer to e-mails with NCSBN dated 05/23/2019 and page 2 of the BOEN meeting minutes from the 06/19/2019 meeting.

- c. In September 2019 the Health Education System Incorporated (HESI) two-day Live Review course was added to the Seminar course that is taken in the student's last term. This was offered to the 10/2019 and 01/2020 graduating classes and 82 % of those students passed the NCLEX. Those students also took the NCLEX in 58 days, as PCI is monitoring the time from graduation to NCLEX testing.
- d. The number of NCLEX-PN review practice questions were increased in the Seminar course taken in the student's last term.
- e. PCI will use the HESI/Saunders Online Review and the lessons from the modules have been integrated into the Seminar course and curriculum (Exhibit 2).
- f. PCI will continue with the Live Review delivered in real time via Zoom (Virtual Live Review that is facilitated by Elsevier).
- g. As of July 2020, PCI will include the cost of the Pearson Vue application and NCLEX fee with the student service fees.

2. **Request for offering virtual clinical simulation to select students.**

- a. There are 44 students who were not able to graduate in Aril 2020 due to the inability to complete the required clinical hours brought about by the current COVID-19 situation.
- b. These students have 32 to 84 hours (4-19%) remaining to complete the PCI program requirement of 798 clinical hours. PCI provided information for each student regarding the clinical hours completed, the hours needed to complete to the 750 hours (regulatory requirement) and the actual remaining scheduled clinical hours.
- c. PCI is requesting to offer virtual clinical experiences for consideration of a minimum of 48 hours and a maximum of 100 hours via Virtual Clinical Excursion (VCE) through Elsevier Evolve.

- i. The student is provided with a virtual clinical workbook to serve as a guide through a virtual hospital setting where the student can continue to practice communication, documentation, evaluation and safe medication administration. The instructor will hold pre and post conferences and the student will be assigned to complete tasks for their patient(s).
- d. The students will also be given cases studies to complete and NCLEX review questions.
- e. The student will be evaluated on their ability to demonstrate competence and safe practice of clinical skills including medication administration, in the school clinical lab with the instructor.

Please note: The Department is providing the Commissioner's Order dated 03/13/2020, Blast Faxes 2020-40 and 2020-44 and the Executive Order 7UU (as these documents are referenced in this request).

3. PCI is submitting a proposal for a revised Practical Nursing program, which separates the lab component from the corresponding didactic course.

- a. The requested revision will not change the number of program hours.
- b. Proposed implementation is July or October 2020 contingent on approval.
- c. Current enrolled students will not be affected.
- d. There is an explanation of the changes in Terms 1, 2, 3 4 and 5 for both the day and evening programs.
- e. An additional course will be added to Term 5, "Role Transition: from Student to practitioner".
- f. Evening program is requesting to decrease the program length from 21 months.

Please note: PCI did not provide the required information per 20-90-47 (d) Major curriculum changes including explanation of the effects of the change on function and role of graduates, plan for evaluation of the change, curriculum for the new course "Role Transition: From Student to Practitioner" and curriculum for each course that has been revised.

• Updates regarding the ongoing national accreditation for CT Schools that provide Registered Nursing Programs:

- Capital Community College: ongoing accreditation by the Accreditation Commission of Education in Nursing (ACEN).
- St. Vincent's College: ongoing accreditation by ACEN.
- Sacred Heart University: ongoing accreditation by the Commission on Collegiate Nursing Education (CCNE).

SCHOOL OF EDUCATION
& PROFESSIONAL STUDIES

CCSU



Central Connecticut State University

May 29, 2020

Helen M. Smith
410 Capital Avenue
PO Box 340308 MS# 12HSR
Hartford, CT 06134-0308

Dear Ms. Smith,

I am writing to you to make you aware that Dr. Catherine Thomas, who is currently serving as the interim Department Chair in our Nursing department, has been elected Chair of the department. Dr. Thomas will serve as Department Chair September 1, 2020 – August 31, 2023. Dr. Thomas will continue as interim Department Chair until September 1, 2020.

Sincerely,

A handwritten signature in blue ink that reads "Kimberly Kostelis".

Dr. Kimberly Kostelis

Dean

Catherine S. Thomas
89 Brookside Drive
West Hartford, CT 06107

Education

D.N.P, Regis College, Weston MA, August 2014
Concentration: Education

M.S., Nursing, University of Hartford, Hartford, CT, May 1998
Concentration: Education

B.S., Nursing, University of Saint Joseph, West Hartford, CT, May 1991

Certifications

Certified Nurse Educator, earned in November 2015 from the National League for Nursing
Certificate # NLN 534218, Expires December 31, 2020

ELNEC Trainer, earned in February 2019, completed a train the trainer core curriculum course
with the End of Life Nursing Education Consortium, Expires in February 2023

Academic/Teaching Experience

Assistant Nursing Professor Central Connecticut State University, New Britain, CT
August 2012 – present: Full Time
Interim Department Chair
January 1, 2020 – present, 2017 – 2018 Academic Year

- Interim Department Chair for 2017- 2018 academic year: Responsible for BSN, RN-BSN and MSN Programs, as well as the planning for in partnership with Facilities Department - the Department Construction/Expansion and successful move during the spring semester across campus from Barnard Hall to Copernicus Hall.
- Teaching responsibilities in the pre-licensure BSN program, for both theory and clinical sections of several NRSE courses. Teaching in the MSN program for several online courses. Have fulfilled the role of course and clinical coordinator for several BSN courses: the senior level medical-surgical NRSE 470 course, and for the sophomore level, gerontology NRSE 270 and Well population NRSE 250 courses.
- Theory course assignments have included courses at the sophomore, junior and senior level, encompassing the medical-surgical focused courses, as well as courses focusing on leadership and professional aspects of nursing. (Please refer to summary of course teaching experiences list below)

- Clinical course assignments for NRSE 320, 470 and 495 level students have been on medical-surgical acute care units at Saint Francis Hospital, for cardiac telemetry and step-down level patients with a variety of diseases and conditions requiring acute interventions. Student observations have been negotiated and arranged every semester in collaboration with hospital nursing education department.
- Worked with collaborative team to write self-study report, and participated during visits for Spring 2016 Undergraduate CCNE Accreditation in Spring , and for MSN CCNE Accreditation in Fall 2018

Summary of course teaching experiences at CCSU:

NRSE 150 Nutrition - Emphasizes basic normal nutrition across the lifespan and the current guidelines for maintaining wellness through healthy eating. The interconnectedness of nutrition and health or disease is stressed and an introduction to nutritional therapy is included. Nursing application of nutritional knowledge is the primary focus of this course.

NRSE 210 Health Assessment - Provides the theoretical knowledge and skills necessary to perform a comprehensive health assessment including comprehensive history taking, interviewing, and assessment techniques.

NRSE 250 Nursing Care of Well Populations – Focus on well populations. The nursing role in promotion of disease and encouragement of healthy behaviors in populations across the lifespan is emphasized.

NRSE 310 Altered Health Concepts and Therapeutic Interventions - Selected health problems and associated pharmacological/holistic interventions are addressed from a lifespan perspective. Medication administration, therapy and safety are considered along with non-pharmacological interventions

NRSE 320 Holistic Care of Adults with Health Alterations - Nursing care of adults across altered health states. These health alterations will be explored with a focus on their impact on mental and spiritual wellness. Evidence based nursing interventions appropriate to this population will also be covered.

NRSE 470 Holistic Nursing Care of the Critically Ill - Nursing care for critically ill populations across the life span with a focus on altered body systems and the impact on mental and spiritual wellness. Emphasis is on integration of professional role in a changing practice environment.

NRSE 485 Professional Values and Role Development - Analysis of current social, political and ethical healthcare issues. Concepts relevant to ethical and professional behaviors will be incorporated.

NRSE 490 Leadership and Management in Nursing - Concepts and practices of leadership needed by healthcare clinicians to fulfill professional responsibilities for the quality of care for patients, for caregivers, and organizations. Emphasis on leadership, quality and safety, group dynamics, staff motivation and conflict resolution.

NRSE 498 Special Studies in Nursing - Individualized plan to aid the learner in attainment of professional goals. Plan may consist of directed study of reading, clinical experience, individual instruction, research, or other appropriate activities. Focus is on study plans and preparation strategies for HESI Exit and the NCLEX licensure exams.

NRSE 500 Pathophysiology and Health Assessment Across the Lifespan – Includes advanced health assessment knowledge and advanced physical assessment techniques. Pathophysiology of

selected chronic disease processes are studied. Pediatric, Adult and Elderly considerations will be reviewed.

NRSE 503 Nursing Leadership, Management and Inter-professional Collaboration - Concepts of leadership and management in the care of persons needing end-of-life care and chronic care are analyzed. The benefits of the multidisciplinary team for both areas are studied. The client and support person(s) are included in the team.

NRSE 506 Current Pharmacology and Complementary Therapies in Hospice and Palliative Care – Course examines pharmacology to provide symptom management and pain control. Complimentary therapies such as acupuncture, acupressure, Reiki, cranio-sacral therapy, music and art therapy, massage and biofeedback.

Associate Nursing Professor

Goodwin College, East Hartford, CT

Full Time

January 2007 – May 2012

Adjunct Nursing Instructor

September 2005 – January 2007

- Held teaching responsibilities in both the Associate Degree (AD) and the RN-BSN programs.
- AD program responsibilities included; clinical teaching at large urban hospital on cardiac surgical and intermediate care units for senior level students, providing clinical make up sessions in nursing skills laboratory, and program improvements such as the development of guidelines related to student recommendation process, developing structure and outlines for clinical lab make ups to promote consistency.
- RN-BSN responsibilities included; teaching the initial course in a hybrid format, and the final nursing course for the program. Curriculum development and revisions, contributing to, reviewing and editing initial version of student handbook, team development and revision of multiple evaluation rubrics, curriculum mapping and reviews, developing 300 and 400 level courses. Advocated for development of elective pharmacology course and was team-taught as an elective course with an adjunct faculty member (clinical pharmacist).
- Previous responsibilities for AD program included; teaching both the junior and senior level medical-surgical theory courses, teaching clinical sections for both junior and senior level students in large urban hospital on various clinical units, participation in course revision and curriculum review process, and participating in writing, reviewing and editing of the NLNAC self-study, and participated during accreditation visits.

Summary of course teaching experiences at Goodwin College:

NU 200 Adults and the Wellness Continuum I – Focus of this course is on the care of adults experiencing disruptions in health status associated with both acute and chronic health conditions. Associate Degree Program.

NU 220 Integration of Nursing Practice: Adults with Complex Health Problems – Culminating nursing course that provides students with experiences designed to promote the integration of

nursing methods in the care of adults experiencing complex alterations in physical and psychological health functions. Associate Degree Program.

NU 300 Foundations of Professional Nursing – Initial RN-BSN course introduces and orients the RN student to baccalaureate nursing education and professional nursing practice. The role and expectations of the baccalaureate-prepared RN are explored and integrated into personal professional practice. RN-BSN Program.

NU 440 Independent Study – Elective course that allows students to explore clinical practice in a variety of settings. Students observe and provide care with an agency-based preceptor, with faculty acting as co-coordinator and supervisor. Clinical site visits, journals and meetings with students are used to support student growth. RN-BSN Program.

NU 378 – Pharmacology in Nursing Practice – Hybrid course that is co-taught with clinical pharmacist. Students are exposed to an in-depth review of pharmacology concepts and nursing management. Students complete a project that allows them to explore their current clinical area further, or to explore pharmacology and nursing practice in an area where they hope to practice in the future. RN-BSN Program.

NU 460 Seminar in Professional Nursing Leadership – Synthesis course that provides the students multiple opportunities for self-reflection and evaluation, application of leadership principles to their current and future clinical settings and setting of career goals. RN-BSN Program.

HSC 350 Continuous Quality Improvement in Nursing - Students from several different programs may enroll in the course, which focuses on explaining the various goals and methods used in CQI across various health care settings. Enrollment is open to both nursing and health science students. Health Science Program.

Clinical Nursing Instructor
September 1998 – May 2000 Adjunct

Three Rivers Community College, Norwich, CT

- Coordinated, supervised and evaluated clinical experiences for freshman level AD students.
- Collaborated with full time faculty in meetings on student progress, clinical site opportunities and evaluations.
- Provided part-time nursing lab instruction for all level of students; provided one-on-one or small group instruction, guidance and review of nursing skills as needed.

Academic Committee Memberships

Central Connecticut State University:

2014 – 2015: SEPS Diversity Committee, Alternate Representative – Faculty Senate, Department Library Liaison

2015 – 2016: Alternate Representative – Faculty Senate, Information Technology University Committee

2016-2017: Faculty Senator - Faculty Senate, SEPS Diversity Committee, Chair for Faculty Search Committee for C17-021 (Community and Psychiatric Position) and member of Faculty Search Committee for C17-020 (Pediatric Position), Information Technology

University Committee

2017-2018: SEPS Diversity Committee, Community Engagement University Committee, Information Technology University Committee - elected as Secretary

2018 – 2019: SEPS Diversity Committee, Community Engagement University Committee, Information Technology University Committee

Goodwin College:

September 2006 – July 2012: Member of Faculty Senate Committee

January 2009 – July 2012: Member of Employee Development Committee, Tier II Committee Chair of Sub-committee on Nomenclature Development from September 2010 – 2012

January 2009 – January 2010: Vice Chair and member of Assessment and Planning Chapter Committee for NEASC Self Study

July 2010 – December 2010: Member of Search Committee for Dean of Student Services, Faculty Representative

March 2010 – July 2012: Member of Academic Integrity Board

August 2010 – November 2010: Member of Nursing Alumni Reunion Planning Committee

February 2011 – July 2012: Member of Institutional Review Board

Presentations

Test Item Writing: An Introduction to Concepts and Challenges, Oral Presentation at Scholar Hour, Goodwin College, September 2010

First Time Implementation of Program Based HESI Remediation, Poster Presentation, Elsevier Faculty Development Conference, January 2014, National Conference in Las Vegas, NV *Student Use of Technology in a Pilot Peer Tutoring Program*, Poster Presentation with Dr. Nancy Peer, Saint Anselm 23rd Annual Conference for Nurse Educators, May 2015, Regional Conference in Cape Cod, MA

Strike Back Against Sepsis: Focus on Early Recognition and Treatment, Oral Presentation, Academy of Medical-Surgical Nurses Convention, September 2015, National Convention in Las Vegas, NV

Development and Implementation of a National Service Learning Mission Trip, Poster Presentation, Sigma Theta Tau International Leadership Connection, September 2016, International Conference in Indianapolis, IN

A Program Innovation: Connecting Service Learning to University and Department Mission and Outcomes, Oral Presentation with Dr. Leona Konieczny, Connecticut State Colleges & Universities Faculty Research Conference, March 2017, in New Britain, CT

Use of Technology in a Pilot Peer Tutoring Program, Poster Presentation with Dr. Nancy Peer, Connecticut State Colleges & Universities Faculty Research Conference, March 2017, in New Britain, CT

Impact of Service Learning on Intercultural Sensitivity of Nursing Students, Oral Presentation, with Dr. Leona Konieczny, Connecticut State College & University System - Shared Governance & Student Success: Building a Better Connecticut in an Era of Fiscal Uncertainty, April 2017, in New Britain, CT

Evaluation of Students' Perception Compared with Baccalaureate Program Objectives of a Peer Tutoring Program, Oral Presentation with Dr. Nancy Peer, Sigma Theta Tau International 28th International Research Congress, July 2017 in Dublin, Ireland

Supporting the Development of a Social Justice Perspective through Service Learning, Oral Presentation with Dr. Leona Konieczny, Sigma Theta Tau International 44th Biennial Convention, October/November 2017, in Indianapolis, IN

Study Outcomes of Service Learning on Intercultural Sensitivity in BSN Students, Oral Presentation with Dr. Leona Konieczny, Sigma Theta Tau International 44th Biennial Convention, October/November 2017, in Indianapolis, IN

Nursing Program Level and University Experience Impact on Intercultural Sensitivity in BSN Students, with Dr. Leona Konieczny and Dr. Linda E. Clark, Poster Presentation, ATI 2018 National Nurse Educator Summit, April 2018 in Salt Lake City, UT

Publications

Development and Implementation of a National Service Learning Experience with Baccalaureate Nursing Students, Manuscript accepted for publication March 2017, Journal of Nursing Education and Practice.

Impact of a Service Learning Experience on the Intercultural Sensitivity of Nursing Students, with Dr. Leona Konieczny, accepted for publication March 2017, Clinical Nursing Studies.

Program Level of Nursing Students and the Achievement of Intercultural Sensitivity after Service Learning, with Dr. Leona Konieczny, accepted for publication December 2017, Clinical Nursing Studies.

Intercultural Sensitivity in Nursing Students across Program Levels: A Factor in Program Evaluation, with Dr. Leona Konieczny and Dr. Linda E. Clark, accepted for publication March 2018, International Journal of Innovation and Research.

Nursing Faculty Coaches: Uncovering a Hidden Resource for NCLEX-RN Success, with Dr. Michele McKelvey, Kerri Langevin, Dr. Jill Espelin, Dr. Leona Konieczny, Dr. Nancy Peer, and

Dr. Stacy Christensen, accepted for publication Spring 2018, Creative Nursing, Journal of Values, Issues, Experience & Collaboration.

Professional Conference Attendance/Continuing Education Activities

October 2008: C.N.A 102nd Convention: Transition: Changes, Choices, Impact

September 2009 NLN Summit: Exploring Pathways to Excellence in Clinical Education

September 2010 NLN Summit: The Power of Nursing Education

September 2011 NLN Summit: Leading Academic Program: Advancing the Healthcare of the Nation

October 2011: Northeast Association of Allied Health Educators: The Human Side of Leadership

July 2011: Robert M. Jeresaty Cardiovascular Symposium at SFH

October 2012: CCSU: Mindful Education: Building Inner Resilience

November 2012: Maria Gustin Memorial Conference: The 21st Century Nurse; Thriving in a Reformed Health System

January 2013: Elsevier Faculty Development Conference

May 2013: Robert M. Jeresaty Cardiovascular Symposium at SFH

January 2014: Elsevier Faculty Development Conference

May 2015: Robert M. Jeresaty Cardiovascular Symposium at SFH

May 2015: Conference for Nurse Educators – Clinicians and Educators: Partner's in Developing Tomorrow's Nurse

September 2016: Academy of Medical Surgical Nurses National Conference

March 2016: Sigma Theta Tau Webinar: Leading and Serving on a Medical Mission Webinar

April 2016: Maria Gustin Memorial Conference: Inter-professional Practice

May 2016: Robert M. Jeresaty Cardiovascular Symposium at SFH

September 2016: Sigma Theta Tau International: Leadership Connection 2016

February 2017: Sigma Theta Tau International Social Media for Health Care Providers Webinar

February 2017: ANIA The Smart Hospital Experience Webinar

March 2017: AMSN If It Isn't an MI, What Is IT? Webinar

March 2017: Connecticut Nurses Association Student Legislative Day

March 2017: AMSN Improving Nursing Care: Examination Errors of Omission Webinar

May 2017: Robert M. Jeresaty Cardiovascular Symposium at SFH

June 2017: BLS Healthcare Provider CPR

June 2017: AMSN Convention Up and Down the GI Track Webinar

July 2017: Sigma Theta Tau International 28th International Research Congress

October 2017: Sigma Theta Tau International 44th Biennial Convention

October 2018: AACN Baccalaureate Education Conference

Professional Work Experience

Camp Nurse
Summers 2012 – 2019

YMCA Camp Woodstock, Woodstock, CT

- Provide care to children at overnight camp, including triage of potential or actual communicable illnesses and significant injuries in partnership with camp director.
- Provide triage, and coordinate care with onsite emergency medical technician, along with camp director and staff.
- Responsible for administration of daily medication to campers from seven to sixteen years of age, and as needed following standing orders outlined by medical provider.
- Communicate on weekly basis or as needed with medical provider, and whenever necessary with parents of campers or staff under eighteen years of age.

Medical Clinical Nurse Specialist
November 2003 – July 2005

Baystate Medical Center, Springfield, MA

- Served as clinical expert and resource for nursing staff, including emergent and emergency situations as well as chart audits for compliance monitoring. Worked in partnership with surgical Clinical Nurse Specialist to provide cardiac telemetry course for nurses, monitor technicians, and secretaries as needed throughout the calendar year.
- Participated in orientation of newly hired nurses, providing support and guidance as needed to both the new nurse and preceptor.
- Member of multiple committees (facility wide and unit based), identified and worked towards participation goals either as active member or sub-committee chair, provided mentorship and guidance to unit based committees.
- Collaborated with unit managers and department chair as team to promote the goals of the units, as well as the medical-surgical nursing department.
- Functioned as part of a team with nurse manager, critical care medical director, and department chair to establish first medical step-down unit at the medical center, including the coordination and provision of an independent step-down core curriculum course.
- Functioned as a “super-user” and mentor for the conversion to a new computer-based documentation system (Cerner).
- Participated in the instruction with the other Clinical Nurse Specialists of a facility based senior level medical-surgical case study application course for the University of Massachusetts BSN program.

Clinical Educator
June 2002 – November 2003

Baystate Medical Center, Springfield, MA

- Provided educational services for the night shift staff on seven medical-surgical units.
- Monitored the progress of newly graduated nurses and their preceptors, provided support and guidance when needed.

- Met on a weekly basis with the Staff Development Director and department team members to provide updates on new graduate nurse progress and any needed support from day shift team.

Staff Education Director
March 2001 – June 2002

Parkview Specialty Hospital, Springfield, MA

- Coordinated department focus and delegated responsibilities to department employees, and managed the annual department budget and employee annual evaluations.
- Updated the nursing orientation to a competency based program.
- Organized and updated the record keeping methods of the department.
- Collaborated with facility Directors of Nursing (Acute and Chronic) in addressing daily clinical issues.
- Arranged for or created in-services for nursing staff based on identified needs, from both internal and external resources.

Staff Development Coordinator
August 2000 – March 2001

Cheshire Convalescent Center, Cheshire, CT

- Revised and updated general orientation program, including preceptor responsibilities.
- Identified and coordinated which nurses needed to attend an IV certification class.
- Implemented a needs assessment for all employees, to better coordinate in-services.
- Revised and updated the orientation program for all volunteers.
- Implemented an immediate plan to offer all required mandatory in-services before January 2001.

Intensive Care Unit Staff Nurse
August 2000 – January 2006 (per-diem)
December 1998 – August 2000 (full time)

Bristol Hospital, Bristol, CT

- Identified complex patient care problems noting subtle changes in clinical status and anticipated outcomes of nursing care and interventions.
- Utilized approaches and techniques to accomplish patient care goals and objectives while coordinating patient care with interdisciplinary team members.
- Evaluated and documented effectiveness of patient care plan, degree of goal attainment; revised plans when necessary and made appropriate referrals.
- Participated in the role of charge nurse and as a mentor to novice staff members.
- Educated both patient and family members on disease process, nursing care, and clinical status.

Intensive Care Unit Staff Nurse
September 1994 – August 1998 (full time)

Saint Francis Hospital, Hartford, CT

- Identified complex patient care problems noting subtle changes in clinical status and anticipated outcomes of nursing care and interventions.
- Utilized approaches and techniques to accomplish patient care goals and objectives while coordinating patient care with interdisciplinary team members.
- Evaluated and documented effectiveness of patient care plan, degree of goal attainment; revised plans when necessary and made appropriate referrals.
- Educated both patient and family members on disease process, nursing care, and clinical status.
 - Embraced changes brought about by move into new patient care tower, transitioned from MICU/CCU to the CSICU.
- Participated in preoperative and postoperative teaching for cardiac patients and families.
- Functioned as charge nurse, and as a preceptor to new employees.
- Successfully completed both ACLS (advanced cardiac life support) and IABP (intra-aortic balloon pump) courses, and assumed patient care responsibilities incorporating those concepts.

Staff Nurse on Vascular/Thoracic Surgical Unit
June 1991 – September 1994 (full time)

Hartford Hospital, Hartford, CT

- Identified patient care problems and needs, noted changes in clinical status and anticipated the outcomes of nursing care and interventions.
- As a primary care nurse, utilized approaches and techniques to meet patient care goals while coordinating care with interdisciplinary team.
- Participated in discharge planning, including extensive teaching on Coumadin regimens.
- Successfully completed a telemetry course and applied new knowledge to patient care.

Professional Memberships and Service

Academy of Medical-Surgical Nurses
Sigma Theta Tau International Honor Society of Nursing
American and Connecticut Nurses Associations

Member of Connecticut League for Nursing Informatics Think Tank January 2011 – September 2012. Served as Interim Chair from February 2012 to September 2012

Sigma Theta Tau International Honor Society of Nursing - Iota Upsilon at Large Chapter Board Member: CCSU counselor (2015- 2017), CCSU Vice President (2017 – present), Leadership Succession Committee Chair (2016 - present), served as Biennial Convention Chapter Delegate October 2017 and November 2019

Hospital for Special Care Maria Gustin Conference Planning Committee for 2016, 2018 and 2019 Conferences

Undergraduate Division Matriculation Date: 9/1/1987
 Advisors: Current Class: Senior

Undergraduate Division Matriculation Date: 9/1/1987
 Advisors: Current Class: Senior

Course Number Title Grade Rpt Att'd Em'd Q.Pts Gpa

Credit By Exam

BIOL-101 AP Biology T 0.00 3.00 0.00

Total of Credits: 3.00

1987-1988 Academic Year: Fall

BIOL-116 BIOLOGICAL CONCEPTS B+ 4.00 4.00 13.32
 CHEM-150 FUND CHEM PRINCIPLES D+ 4.00 4.00 5.32
 COMM-130 INTRO TO MANUAL COMMUN A- 3.00 3.00 11.01
 ENGL-105 ART OF EFFECTIVE WRITING B- 3.00 3.00 8.01
 INTD-100 FRESHMAN ROUNDTABLE P 1.00 1.00 0.00
 SOCL-101 INTRO TO SOCIOLOGY C+ 3.00 3.00 6.99

Term Totals: 18.00 18.00 44.65 2.6264

Career Totals: 18.00 21.00 44.65 2.6264

1987-1988 Academic Year: Spring

BIOL-222 MICROBIOLOGY B 3.00 3.00 9.00
 CHEM-230 SURVEY/ORGANIC CHEM B- 4.00 4.00 10.68
 COMM-131 INTRO/MANUAL COMMUN B- 3.00 3.00 8.01
 PHED-125 SELF DEFENSE P 0.50 0.50 0.00
 PHIL-120 PROB OF PHIL C+ 3.00 3.00 6.99
 PSYC-100 INTRO PSYCHOLOGY C+ 3.00 3.00 6.99

Term Totals: 16.50 16.50 41.67 2.6043

Career Totals: 34.50 37.50 86.32 2.6157

1988-1989 Academic Year: Fall

BIOL-341 ANATOMY & PHYSIOLOGY C+ 4.00 4.00 9.32
 CHEM-140 GENERAL CHEMISTRY C 4.00 4.00 8.00
 CHEM-240 BIOCHEM/HUMAN BODY B- 4.00 4.00 10.68
 NURS-101 NURSING CONCEPTS B 3.00 3.00 9.00
 NURS-102 NURSING SKILLS P 1.00 1.00 0.00

1988-1989 Academic Year: Fall

SOCL-221 SOCIOLOGY/THE FAMILY B 3.00 3.00 9.00

Term Totals: 19.00 19.00 46.00 2.5555

Career Totals: 53.50 58.50 132.32 2.5945

1988-1989 Academic Year: Spring

BIOL-342 ANATOMY & PHYSIOLOGY C+ 4.00 4.00 9.32
 NURS-220 FUNDAMENTALS/NUTRITION B- 3.00 3.00 9.00
 NURS-200 FAMILY HEALTH B+ 4.00 4.00 13.32
 NURS-220 HEALTH ASSESSMENT B 4.00 4.00 12.00
 PSYC-338 DEVELOPMENTAL PSYCH B+ 3.00 3.00 8.99

Term Totals: 18.00 18.00 53.63 2.9794

Career Totals: 71.50 74.50 185.95 2.6949

1989-1990 Academic Year: Fall

FIAR-334 HISTORY OF ART I A 3.00 3.00 12.00
 FR-110 UH: ELEM FRENCH I A- 3.00 3.00 11.01
 NURS-300 NURS PROC/ACUTE ILL B 6.00 6.00 18.00
 NURS-330 PHARMACOLOGY B+ 3.00 3.00 9.99

Term Totals: 15.00 15.00 51.00 3.4000

Career Totals: 86.50 89.50 236.95 2.8208

1989-1990 Academic Year: Spring

FLL-111 UH: ELEMENTARY FRENCH II B+ 3.00 3.00 9.99
 NURS-301 NURS PROC/CHRONIC ILL B- 5.00 5.00 13.35
 NURS-350 MENTAL HEALTH/ILLNESS A- 4.00 4.00 16.00
 RELS-301 MORAL ISSUES IN HEALTH CARE A A 3.00 3.00 12.00

Term Totals: 15.00 15.00 51.34 3.4226

Career Totals: 101.50 104.50 288.29 2.9120

1990-1991 Academic Year: Fall

NURS-400 NURSING IN COMMUNITY AND HE B+ 4.00 4.00 13.32
 NURS-420 ADV CONCEPT IN PARENT INFAN B+ 3.00 3.00 9.99
 NURS-460 NURSING RESEARCH B+ 3.00 3.00 9.99

Catherine Susan Smith
 29 Northbrook Drive
 West Hartford, CT 06117


 Registrar



1878 Asylum Ave.
West Hartford, CT
06117-2700
866.231.5225

Saint Joseph College
Office of the Registrar

Date printed: 4/11/2012

ID:
Name: e Susan Smith

Undergraduate Division Matriculation Date: 9/1/1987
Advisors: Current Class: Senior

Course Number	Title	Grade	Rpt	Attd	Ernd	Q.Pts	Gpa
1990-1991 Academic Year - Fall							
PHED-168	TRIMNASTICS	P	0.50	0.50	0.00		
RELS-201	THE CHURCH: A CONTEMPORARY B		3.00	3.00	9.00		
Term Totals:							13.50 13.50 42.30 3.2538
Career Totals:							115.01 118.01 330.59 2.9516

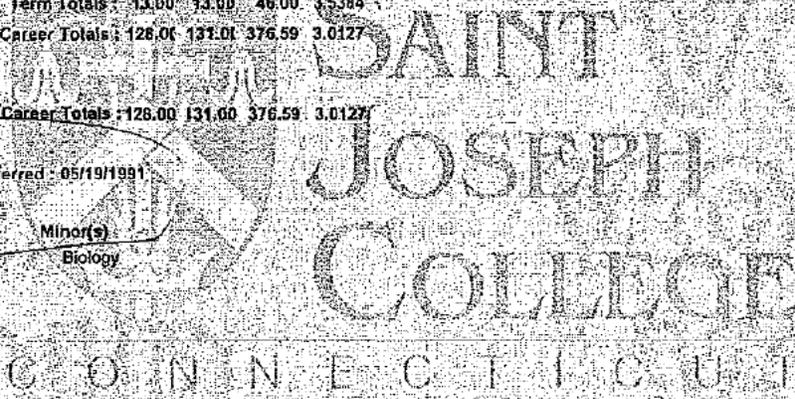
1990-1991 Academic Year - Spring							
ENGL-221	ENGLISH 221	B+	3.00	3.00	9.99		
GERO-111	BIOLOGY OF AGING	A	1.00	1.00	4.00		
GERO-113	HEALTH OF AGING	A+	1.00	1.00	3.67		
NURS-490	SEM ISSUES LEADRSHP IN PROF	B+	3.00	3.00	9.99		
NURS-490	CLINICAL PRACTICUM NICU	A	5.00	5.00	18.35		
Term Totals:							13.00 13.00 46.00 3.5384
Career Totals:							128.01 131.01 376.59 3.0127

Division Career Totals: 128.00 131.00 376.59 3.0127

Degree Information:

(1) Bachelor of Science Date Conferred: 05/19/1991

Major(s) Minor(s)
Nursing Biology
Comprehensive Exam Passed
Writing Portfolio not Required



Catherine Susan Smith
29 Northbrook Drive
West Hartford, CT 06117

Registrar



UNIVERSITY OF HARTFORD

200 BLOOMFIELD AVENUE
WEST HARTFORD, CT 06117

Record of: Catherine Susan Thomas
Student No: 115-07-897

Date Issued: 28-MAR-2012

OFFICIAL

Page: 1

Course Level: Graduate
Advisor:
Matriculated: Fall Term 1995

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

Degree Awarded: Master of Science Nursing 17-MAY-1998
Major: Nursing

SUBJ NO.	COURSE TITLE	CRED	GRD	PTS	R
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INSTITUTION CREDIT:

Fall Term 1994
Unassigned
No Major
NUR 615 Theories Learning & Tech 3.00 A- 11.01
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 11.01 GPA: 3.67

Spring Term 1995
Unassigned
No Major
EDT 610 Computer As Instruc Tool 3.00 A 12.00
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 12.00 GPA: 4.00

Summer Term 1995
Unassigned
No Major
NUR 612 Patient Education 3.00 A- 11.01
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 11.01 GPA: 3.67

Fall Term 1995
Educ., Nursing & Health Prof.
Nursing
NUR 610 Theoretical Perspectives 3.00 B+ 9.99
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 9.99 GPA: 3.33

Spring Term 1996
Educ., Nursing & Health Prof.

***** CONTINUED ON NEXT COLUMN *****

SUBJ NO.	COURSE TITLE	CRED	GRD	PTS	R
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Institution Information continued:
Nursing
NUR 624 Adv.Nurs.Pract..Ad.Hlth 4.00 P 0.00
Ehrs: 4.00 GPA-Hrs: 0.00 Pts: 0.00 GPA: 0.00

Fall Term 1996
Educ., Nursing & Health Prof.
Nursing
NUR 618 Research Methods in Nur 3.00 A- 11.01
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 11.01 GPA: 3.67

Spring Term 1997
Educ., Nursing & Health Prof.
Nursing
NUR 620 Scholarly Inquiry 3.00 B+ 9.99
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 9.99 GPA: 3.33
Good Standing

Summer Term 1997
Educ., Nursing & Health Prof.
Nursing
NUR 640 Contemporary Topics in Nursing 3.00 A 12.00
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 12.00 GPA: 4.00

Fall Term 1997
Educ., Nursing & Health Prof.
Nursing
NUR 627 Theor.Basis of Nur.Educ. 3.00 A- 11.01
Ehrs: 3.00 GPA-Hrs: 3.00 Pts: 11.01 GPA: 3.67
Good Standing

Spring Term 1998
Educ., Nursing & Health Prof.
Nursing
NUR 631 Practicum&Seminar Nursing Ed. 4.00 P 0.00
NUR 635 Graduate Research Seminar 1.00 A 4.00
Ehrs: 5.00 GPA-Hrs: 1.00 Pts: 4.00 GPA: 4.00
Good Standing

***** CONTINUED ON PAGE 2 *****

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- ③ Reverse side shows university name as an artificial watermark.



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ONLY WITH MULTICOLORED
SIGNATURE AND SEAL

Screen E. Lay

DIRECTOR, REGISTRATION AND RECORDS



UNIVERSITY OF HARTFORD

200 BLOOMFIELD AVENUE
WEST HARTFORD, CT 06117

Record of: Catherine Susan Thomas
Student No: 115-07-897

Date Issued: 28-MAR-2012

Level: Graduate

OFFICIAL

Page: 2

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

	Earned Hrs	GPA Hrs	Points	GPA
TOTAL INSTITUTION	33.00	25.00	92.02	3.68
TOTAL TRANSFER	0.00	0.00	0.00	0.00
OVERALL	33.00	25.00	92.02	3.68

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

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SIGNATURE AND SEAL

Screen G. Lay
DIRECTOR, REGISTRATION AND RECORDS

Edith Chapman
 Authorized Signature

Office of the Registrar
 235 Wellesley Street Weston, Massachusetts 02493 (781) 768-7280

Name Thomas, Catherine S Transcript printed 02/11/2015
 Address Term entered 10/S1
 Major(s) Nursing Minor(s)
 Nursing
 Student ID #
 Degree Granted Doctor of Nursing Practice Specialization(s):
 Degree Date August 2014 Nurse Educator

Spring Session 2010

Transfer - Univ Hartford
 NUR 615 Theories Learning & Tech A- 3
 SEM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000

Summer Session I 2010

NU 618 Seminar: Health Policy A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 6 COMP 6 CALC 3 QP 12.0 QPA 4.000

Fall Session 2010

NU 725 Qualitative Res Methods A- 3
 SEM ATT 3 COMP 3 CALC 3 QP 11.1 QPA 3.700
 CUM ATT 9 COMP 9 CALC 6 QP 23.1 QPA 3.850

Spring Session 2011

NU 710 Informatics in Health Care A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 12 COMP 12 CALC 9 QP 35.1 QPA 3.900

Summer Session I 2011

NU 716 Culture & Health: Perspectives A- 3
 SEM ATT 3 COMP 3 CALC 3 QP 11.1 QPA 3.700
 CUM ATT 15 COMP 15 CALC 12 QP 46.2 QPA 3.850

Fall Session 2011

NU 713 Adv Epidemiology/Biostatistic B+ 3
 SEM ATT 3 COMP 3 CALC 3 QP 9.9 QPA 3.300
 CUM ATT 18 COMP 18 CALC 15 QP 56.1 QPA 3.740

Spring Session 2012

NU 722 Quantitative Res Methods A- 3
 SEM ATT 3 COMP 3 CALC 3 QP 11.1 QPA 3.700
 CUM ATT 21 COMP 21 CALC 18 QP 67.2 QPA 3.733

Summer Session I 2012

ED 620 Instructional Meth Nurs Ed A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 24 COMP 24 CALC 21 QP 79.2 QPA 3.771

Continued on next Column/Page

Summer Session II 2012

ED 622 Assessment/Eval Nurs Ed A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 27 COMP 27 CALC 24 QP 91.2 QPA 3.800

Fall Session 2012

NU 738 Application Nursing Science P 6
 SEM ATT 6 COMP 6 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 33 COMP 33 CALC 24 QP 91.2 QPA 3.800

Fall Session 2013

NU 730 Doctoral Thesis Seminar I P 3
 SEM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 36 COMP 36 CALC 24 QP 91.2 QPA 3.800

Spring Session 2014

NU 734 Doctoral Thesis Seminar II P 3
 SEM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 39 COMP 39 CALC 24 QP 91.2 QPA 3.800

End of official record.

REGIS COLLEGE
235 WELLESLEY STREET
WESTON, MA 02493

E. J. Hanna

Authorized Signature

Office of the Registrar
 235 Wellesley Street Weston, Massachusetts 02493 (781) 768-7280

Name: Thomas, Catherine S
 Address: [Redacted]
 Student ID #: [Redacted]
 Degree Granted: Doctor of Nursing Practice
 Degree Date: August 2014
 Specialization(s): Nurse Educator
 Transcript printed: 05/11/2017
 Term entered: 10/S1
 Major(s): Nursing
 Minor(s): [Redacted]

Spring Session 2010

Transfer - Univ Hartford
 NRK 615 Theories Learning & Tech A- 3
 SEM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000

Summer Session I 2010

NU 618 Seminar: Health Policy A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 6 COMP 6 CALC 3 QP 12.0 QPA 4.000

Fall Session 2010

NU 725 Qualitative Res Methods A- 3
 SEM ATT 3 COMP 3 CALC 3 QP 11.3 QPA 3.700
 CUM ATT 9 COMP 9 CALC 6 QP 23.1 QPA 3.850

Spring Session 2011

NU 728 Information in Health Care A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 12 COMP 12 CALC 9 QP 35.1 QPA 3.900

Summer Session I 2011

NU 716 Culture & Health Perspectives A- 3
 SEM ATT 3 COMP 3 CALC 3 QP 11.1 QPA 3.700
 CUM ATT 15 COMP 15 CALC 12 QP 46.2 QPA 3.850

Fall Session 2011

NU 713 Adv Epidemiology/Biostatistic A- 3
 SEM ATT 3 COMP 3 CALC 3 QP 9.9 QPA 3.300
 CUM ATT 18 COMP 18 CALC 15 QP 56.1 QPA 3.740

Spring Session 2012

NU 722 Quantitative Res Methods A- 3
 SEM ATT 3 COMP 3 CALC 3 QP 11.1 QPA 3.700
 CUM ATT 21 COMP 21 CALC 18 QP 67.2 QPA 3.733

Summer Session I 2012

ED 620 Instructional Meth Nurs Ed A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 24 COMP 24 CALC 21 QP 79.2 QPA 3.771

Continued on next Column/Page

Summer Session II 2012

ED 622 Assessment/Eval Nurs Ed A 3
 SEM ATT 3 COMP 3 CALC 3 QP 12.0 QPA 4.000
 CUM ATT 27 COMP 27 CALC 24 QP 91.2 QPA 3.800

Fall Session 2012

NU 738 Application Nursing Science F 6
 SEM ATT 6 COMP 6 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 33 COMP 33 CALC 24 QP 91.2 QPA 3.800

Fall Session 2013

NU 730 Doctoral Thesis Seminar I F 3
 SEM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 36 COMP 36 CALC 24 QP 91.2 QPA 3.600

Spring Session 2014

NU 734 Doctoral Thesis Seminar II F 3
 SEM ATT 3 COMP 3 CALC 0 QP 0.0 QPA 0.000
 CUM ATT 39 COMP 39 CALC 24 QP 91.2 QPA 3.600

End of official record.

Smith, Helen

From: Yoder, Carol S <CYoder@ncc.commnet.edu>
Sent: Tuesday, May 26, 2020 4:42 PM
To: Smith, Helen
Cc: Dominique, Ezechiel
Subject: New Director at Norwalk Community College

Good Afternoon Helen,

I am pleased to let you know that Dr. Ezechiel Dominique has been appointed as Director of Nursing & Allied Health at Norwalk Community College effective June 5, 2020. I will be orienting him through the month of June and return to my former position as of July 1st. Ezechiel is a current nursing faculty member at Norwalk.

Please reach out to him regarding his credentials for the Board. Thank you.

Carol Yoder, MSN, RN
Interim Director, Nursing & Allied Health



Norwalk Community College
 188 Richards Avenue
 Norwalk, CT 06854

Office of the Chief Executive Officer
 (203) 857-7003
 FAX (203) 857-7394

May 20, 2020

Ezechieel Dominique
 547 Second Hill Lane
 Stratford, CT 06614

Dear Mr. Dominique:

I write to offer you the position of Academic Division Director, Nursing and Allied Health at Norwalk Community College effective June 5, 2020. The approximate salary for this CCP 22, step 1, 12 month tenure track position paid over 12 months is \$91,477.00 and the biweekly salary for this appointment is \$3,504.87. You will be represented by Congress of CT (4 Cs) bargaining unit.

If the above is acceptable, please sign and date below and sign the attached contract and return both to the Office of Human Resources as soon as possible. On behalf of the College, I express my appreciation for your acceptance of this offer and hope that you find it both professionally and personally rewarding.

If you have any questions relative to your appointment, please contact Ms. Louisa Jones, Associate Director of Human Resources, at (203) 857-7301.

Sincerely,

Cheryl De Vonish, J.D.
 CEO

CD/ljj

I certify that I am not currently (or during this period of appointment) employed by another State of Connecticut agency or higher education institution.

I certify that I am employed by another State of Connecticut agency or higher education institution and I will complete a dual employment form within five business days.

I accept the position as offered above:

Ezechieel Dominique
 Signature

5/21/2020
 Date

C: Lucille Brown, Esq, Chief Operating Officer
 Michael Butcaris, Ph.D., Interim Dean of Academic Affairs

State of Connecticut
BOARD OF TRUSTEES OF COMMUNITY-TECHNICAL COLLEGES
NOTICE OF APPOINTMENT

College: NORWALK COMMUNITY COLLEGE

Date 5/20/2020

Board Classification

Functional Title/Discipline

CCP 22; step 1

Academic Division Director, Nursing and Allied Health

Appointee Name/Address

Period of Appointment

Ezechiele Dominique

from 6/5/2020 to 6/30/2021

547 Second Hill Lane

First Day to Report to Work 6/5/2020

Stratford, CT 06614

Bargaining Unit:

Employment Obligation:

Type of Appointment:

Service Months:

Congress

Full-time

Standard

12 months

AFT

Part-time

Tenured

10 months

AFSCME Administrators

Hours/Week _____

Terminal

Other

Management/Confidential

FTE _____

Special (non-tenure track)

Non-Bargaining Unit

Three-year appointment

Compensation: **\$91,477.00 approximate annual salary; \$ 3,504.87 biweekly** see below:

- *CCP 22; step 1 FY20 Prorated = \$91,477/26.1 pay periods = \$3,504.87/70 hours biweekly = \$50.07/hr. x 7-hour day = \$350.49 a day x 18 days = \$6,308.82 approx. annual prorated.*
- *CCP 22, step 2 FY 21 July 1, 2020 – June 30, 2021 Approx. Annual \$97,834, \$3,748.43 approx. biweekly*

CONDITIONS

This notice of appointment confirms that the Board of Trustees on _____ approved the appointment noted above. If the terms of the appointment stated herein do not coincide with the action of the Board as recorded in the official minutes, said minutes shall be deemed to constitute the official statement of said terms.

This appointment is made under interim authority of the Chancellor and may be subject to ratification by the Board of Trustees. (Signature of Chancellor required below)

This appointment is made under authority delegated to the Chancellor. (Signature of Chancellor required below)

This appointment is made by the President under authority delegated by the Board of Trustees and /or the Chancellor.

This appointment is subject to the laws of the United States and the State of Connecticut and the personnel policies, procedures and regulations of the Board of Trustees of Community-Technical Colleges.

If this appointment is funded by a federal, state or private grant or contract, the appointment is subject to immediate termination in the event of reduction or elimination of funding.

Please indicate acceptance of this offer of appointment by signing and returning this form to the Human Resources Office, room 306 East Campus as soon as possible.

ACCEPTED: Ezechiele Dominique
Ezechiele Dominique

Date 5/21/2020

Cheryl De Vonish

PRESIDENT: _____

Date 5/20/2020

Cheryl De Vonish, J.D., CEO

CHANCELLOR: _____

Date ____/____/____

(Where required)

Ezechiel Dominique, DNP, MSN, MS-Software Engineering, RN-BC, PMP

Ezechiel001@me.com

Dear BOEN Chairperson,

I am a motivated and dedicated Assistant Professor with a background in classrooms, online, hybrid, clinical settings, nurse informatics, information Technology Project Management, clinical support systems, and health care decision support systems. I have also worked in management and leadership roles for more than 19 years. I also lead many continuous improvement projects. I provide direct nursing care with many years of EPIC experience. I believe my skills and talents make me a great choice for director of nursing program at Norwalk Community College.

Thank you for your consideration, and I look forward to receive approval from you.

Ezechiele Dominique, DNP, MSN, MS, RN-BC, PMP

Nursing Professor

Nursing Education

Enthusiastic, compassionate, and results-oriented Assistant Professor at Norwalk Community College. Candidate has 19+ years of working experience in leadership roles and nursing management. Extremely competent nursing professor with focus on including nurse informatics, medical-surgical, leadership, and geriatrics.

Education

Loyola University, New Orleans, May 2017
Doctor of Nursing Practice

Loyola University, New Orleans, May 2015,
Master of Science in Nursing

St. Vincent Nursing College, Bridgeport, CT, 2007
Associate of Nursing

Fairfield University, Fairfield, CT, 2004
Master of Science in Software Engineering

Western Connecticut State University, Danbury, CT, 1999
Bachelor of Business Administration & MIS

PMI Project Management Professional (PMP)

Informatics Nursing Certification (RN-BC)

Health Informatics Specialization – by University of Minnesota through Coursera
Courses taken:

Leadership in Interprofessional Informatics
Nursing Informatics Training and Education
Nursing Informatics Leadership Theory and Practice
Nursing Informatics Leaders
Skills for Nursing Informatics Leaders
Nursing Informatics Leadership
Informatics Nursing

Notable Highlights

My Scholarly DNP Project, Aug 2016-Dec 2016, a Quality Improvement (QI) Project for a Connecticut Hospice Agency to Improve Pain Management through Better Assessment;
President and Founder of Help Educate a Child Foundation (HEACF), 2006-2012;
Co-Founded French Speaking Baptist Church in Stratford, CT

Professional Affiliations

Member of PMI
American Nurses Association & Connecticut Nurses' Association
Connecticut Nurses' Association-Leadership Committee Chair
American Nursing Informatics Association
Member of Sigma Theta Tau International Honor Society of Nursing

Career History

Norwalk Community College – Assistant Professor – Nursing and Allied Health January 2019-Present

- ✘ Respond to and work with diverse and varied student populations.
- ✘ Support learning for students online, in the classroom, and in clinical settings.
- ✘ Support students in the clinical technical explanation/demonstration of nursing skills, critical thinking, and student mentoring.
- ✘ Evaluate student performance fairly and consistently toward course objectives and return student work promptly to promote maximum learning.
- ✘ Under the direction of the Program Director and Department Chair, responsible for creating online teaching materials on Blackboard, in the classroom, in clinical contexts, and in simulations.
- ✘ Course development and evaluation.
- ✘ Student advisement and tutoring.
- ✘ Develop and maintain relationships with community agencies.
- ✘ I will participate in commencement and convocation activities.
- ✘ Attend Norwalk Community College meetings.

Stone Academy – LPN Instructor November 2017-January 2019

- ✘ Supported learning for students in both the classroom and clinical settings.
- ✘ Supported the teaching/academic planning of the LPN in settings throughout the student experience.
- ✘ Supported students in the clinical technical explanation/demonstration of nursing skills, critical thinking, and student mentoring.
- ✘ Evaluated student performance fairly and consistently toward course objectives and returned student work promptly to promote maximum learning.

Vitas Innovative Hospice Care June 2011-Present

Team Manager/Weekend Administrator

RN Case Management/Primary RN/On Call RN

- ✘ Assured quality, efficient, cost effective, and service excellence-oriented behavior.
- ✘ Had operational oversight of practices.
- ✘ Ensured appropriate utilization of resources and delegation of responsibilities.
- ✘ Facilitated the smooth running of daily business operations and **ensured the provision of optimum care** to patients/families from admission to discharge.
- ✘ Demonstrated an outstanding ability to **guide and mentor staff** regarding various clinical issues, documentation, team problem solving, and appropriate customer service behavior; made certain optimum efforts were applied towards delivery of exceptional customer services.
- ✘ Was responsible for the orientation and training of Educate weekend staff (including clinical specific training and competencies) and general orientation of new staff. Responsible for specific elements of staff training according to Federal and State regulations. Ensured/assisted Vitas Health Care senior management in survey readiness for clinical in servicing and competencies. Developed in-service education program for staff based on assessment, performance improvement information, safety, and competency needs.
- ✘ Continuously strived to **achieve operational excellence and work efficiency**; monitored and regulated staff and volunteer schedules and territory assignments, proposing any changes to maximize productivity; facilitated the growth and development of employees.

- ✘ Undertook various strategic initiatives with a **commitment to continuous growth** and maximized profitability through revenue generation and expense control; enhanced the Vitas culture, improved the company's performance and overall strategic position.
- ✘ Made certain each activity was executed in conformity with all regulations, laws, policies, and procedures that are applicable to hospice and Medicare/Medicaid issues.
- ✘ Exhibited strong business acumen and a flawless track-record of developing and implementing strategies that **met and surpassed performance objectives** across all key result areas; formulated individualized, interdisciplinary plan care and instructions for homemaker-home health aide services.
- ✘ **Established favorable business relationships** with physicians, long-term care facility staff, and HMO case managers to ensure synergy, effectiveness, and continual improvement of delivered care.
- ✘ Conducted thorough analyses of patient medical records concurrently and/or retrospectively for **quality assessment**, utilization review, and discharge planning criteria; directed and deliberately evaluated the nursing care provided to patients.

Sound View Health Care

Mar 2008-June 2011

RN Supervisor

- ✘ **Oversaw, regulated and directed the activities of nursing staff**; guided and challenged employees to deliver to their highest potential; made certain that all staff members understood and adhered to the procedures defined in the Nursing Service Procedures Manual.
- ✘ Ensured the **highest standards of care** were continuously maintained; implemented care in a thorough, skillful, consistent, and continuous manner; practiced consistently with professional standards delivering exceptional patient services with dignity and respect.
- ✘ Effectively and efficiently **managed a range of matters of a contentious nature**, maintaining compliance with industry best practices and company regulations; admitted, transferred, and discharged residents; conducted assessments of resident care plans.

Griffin Hospital

May 2007-Feb 2008

Emergency Room RN

- ✘ **Provided high-quality, skilled nursing services** to assist patients to achieve optimum health and functional health status; formulated plans of care, and appropriate nursing actions that were prioritized and based on determined nursing diagnosis and patient outcomes; met the physical, psychological, social, and rehabilitative needs of the patients.
- ✘ Assessed and **managed complex health problems** following established guidelines; treated each patient with dignity and respect; utilized a professional and respectful tone of voice to promote positive relationships with both the patients and their families.

Swiss Re

Oct 2007-September 2019

Vice President/Information Technology Delivery Manager

- ✘ Excellent organizational, analytical, problem solving, interpersonal, and communication skills. Ability to absorb complex technical information and to communicate effectively with both technical and non-technical audiences. Demonstrated ability to plan and organize projects including schedules, budgets, and project deliverables. Demonstrated ability to obtain and use information effectively, including ability to identify the information needed, seek the information from a variety of sources, and skillfully extract and report the information for business benefit. Excellent collaboration and team building skills. Ability to adapt to changing circumstances through learning, flexibility, and resilience
- ✘ With a balanced and pragmatic approach, coordinated and **executed QA testing efforts** during all phases of the SDLC for many project streams within the P&C Program.
- ✘ Made certain quality standards, procedures, and processes were being adhered to during the creation of new or modified applications/systems across multiple computing environments; worked in conjunction with IT and business partners to **support quality across the full SDLC**.
- ✘ Exhibited **excellence in meeting key objectives in a timely manner**, within the limits of the defined budget and with great quality levels; ensured all testing activity within the project complied with all applicable policies, methods, and standards.

NASDAQ Stock Market

Mar 2000 - Apr 2006

Senior Quality Control Project Leader & Senior QA Analyst

- ✘ **Provided expert-level advice and constructive testing solutions**; developed and executed test plans and test scripts; performed and prioritized multiple tasks seamlessly; reported all discrepancies from the

design/functional requirement; was accountable for the overall testing effort coordination and strategy.

- × Gained experience with quality methodologies.
- × Gained experience in ALM/SQL/SDM and Performance Center.
- × Gained thorough understanding of Agile, Scrum, and Iterative Development.

Smith, Helen

From: Cataudella, Vincent <cataudellav@sacredheart.edu>
Sent: Tuesday, June 2, 2020 2:43 PM
To: Smith, Helen
Cc: ezechie1001@me.com
Subject: SVC Transcript

Importance: High

Helen,

St. Vincent's College (via Sacred Heart University), is sending the following transcript on behalf of Ezechie1 Dominique.

Due to the COVID-19 pandemic, I am unable to mail hard copy St. Vincent's College (SVC) records. However, the following link will provide access to an official SVC academic record. It does not contain my signature or the college seal, as I cannot access our secure paper, but as the custodian of SVC records I can verify its contents are official. I hope you will accept this transcript considering the circumstances.

https://mail.sacredheart-my.sharepoint.com/:b/g/person/cataudellav_sacredheart_edu/Eb95LcB4XoRKvNOpiWmkL2gBQWJXNqzWsLmiJU-A3rHzIA?e=q9Oall

As of July 2, 2018, St. Vincent's College is no longer administering educational programs. All records for previous students have also been transferred to, and are being managed by, Sacred Heart University.

Please respond to confirm receipt of this transcript, or to let me know if you have issues using the link (which sometimes happens when using a shared inbox).

Best,
Vinny



Sacred Heart
UNIVERSITY
ST. VINCENT'S COLLEGE

Vinny Cataudella, Ed.D.
Associate Registrar, St. Vincent's College

e: cataudellav@sacredheart.edu
p: 203-576-5616
f: 475-210-6063
a: 75 Hunting Street, Bridgeport, CT 06606

St. Vincent's College
2800 Main Street
Bridgeport, CT 06606

Record of: Dominique Ezechiel

SBEID:

Course Code	Course Title	Credit Hrs.	Gr	R	Qual Points	GPA
TRANSFER FROM Western Connecticut State University						19961
ENG102T	ENG 149/ENGLISH COMP II	3.00		TR	0.00	
PSY101T	PSY 100/INTRO PSYCHOLOGY	3.00		TR	0.00	
SOC101T	SOC 100/INTRO TO SOCIOLOGY	3.00		TR	0.00	
Undergraduate Total					<u>Earned Hrs.</u>	<u>Qpts.</u> <u>GPA</u>
					9.00	0.00 0.00
TRANSFER FROM Norwalk Community College						19939
MAT101T	MA 101/COLLEGE ALGEBRA	3.00		TR	0.00	
CAR201S	AR 102/HISTORY OF MODERN ART	3.00		TR	0.00	
Undergraduate Total					<u>Earned Hrs.</u>	<u>Qpts.</u> <u>GPA</u>
					6.00	0.00 0.00
Fall 2003						
BIO001V	Con of Human Biology	3.00		A	0.00	
PSY112V	LIFESPAN DEV. PSY.	3.00		B	0.00	
REL101V	INTRO STUDY RELIGION	3.00		B-	8.01	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					6.00	6.00 17.01 2.84
Spring 2004						
BIO212V	LAB ANAT&PHY II	0.00			0.00	
BIO212V	HUMAN ANAT & PHYS II	4.00		B+	13.32	
BIO235V	INTRO MICROBIOLOGY	4.00		B	12.00	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					8.00	8.00 25.32 3.17
Summer 2004						
CPR001V	Cardio Resuscitation	0.00		P	0.00	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					0.00	0.00 0.00 0.00
Fall 2004						
BIO211V	LAB ANAT&PHYS I	0.00			0.00	
BIO211V	HUMAN ANAT & PHYS I	4.00		B	12.00	
NUR101V	INTRO NURSE PRACTICE	7.00		A-	25.69	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					11.00	11.00 37.69 3.43

Course Code	Course Title	Credit Hrs.	Gr	R	Qual Points	GPA
Spring 2005						
NUR124V	ADULT CHILD NUR I	5.00		B	15.00	
NUR129V	INDEPENDENT STUDY	1.00		P	0.00	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					5.00	5.00 15.00 3.00
Fall 2005						
NUR230V	ADULT-CHILD NUR II	5.00		B-	13.35	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					5.00	5.00 13.35 2.67
Spring 2006						
NUR231V	ADULT-CHILD NUR III	6.00		B+	19.98	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					6.00	6.00 19.98 3.33
Summer 2006						
CPR001V	Cardio Resuscitation	0.00		P	0.00	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					0.00	0.00 0.00 0.00
Fall 2006						
NUR232V	ADULT CHILD NUR IV	6.00		E-	16.02	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					6.00	6.00 16.02 2.67
Spring 2007						
NUR123V	FAMILY CONCEPTS	4.00		B	12.00	
NUR270V	NURSING SEMINAR	3.00		B	9.00	
PHI201V	ETHICS	3.00		B-	8.01	
TERM TOTALS:					<u>GPA Hrs.</u>	<u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
					10.00	10.00 29.01 2.90
* GRADUATED 05/18/2007						
* ASSOCIATE OF SCIENCE						
Undergrad CUMULATIVE TOTALS						<u>GPA Hrs.</u> <u>Earned Hrs.</u> <u>Qpts.</u> <u>GPA</u>
						57.0000 72.0000 173.3800 3.0418

Record of: Dominique Ezechiel
500008321

SBEID:

Course Code	Course Title	Credit Hrs.	Gr	R	Qual Points	GPA	Course Code	Course Title	Credit Hrs.	Gr	R	Qual Points	GPA
College			Major			Minor							
ST VINCENTS COLLEGE			A.S. Nursing										

*** END OF TRANSCRIPT ***

COURSE NUMBER	COURSE TITLE	GRADE	CREDIT HOURS	QUALITY POINTS	
Official Graduate Nursing Academic Record					
Higher Education Institutions:					
Loyola University New Orleans		May 2013 -	May 2015		
Sacred Heart Univ		Aug 2012 -	Dec 2012		
Loyola University New Orleans		Jan 2010 -	May 2010		
St Vincents College		Aug 2003 -	May 2007		
Fairfield University		Aug 2000 -	Dec 2003		
Western Connecticut State Univ		Jan 1996 -	Dec 1999		
Norwalk Comm College		Aug 1993 -	Aug 1999		
Degrees Awarded:					
Master of Science in Nursing			May 9, 2015		
College of Social Sciences					
Loyola University New Orleans					
Major: Health Care Systems Management					
-----Spring 2010-----					
Admitted Program:					
College of Social Sciences					
Master of Science in Nursing					
Major: Health Care Systems Management					

NURS-G494 ISSUES IN PROFESSIONAL NURSING		A	3.00	12.00*	
NURS-G494 POPULATION HEALTH		A	3.00	12.00*	

Student Withdrew					
	AHRS	EHRS	QHRS	QPTS	GPA
Current	0.00	0.00	0.00	0.00	0.000
Cumulative	0.00	0.00	0.00	0.00	0.000

Transfer Credit Applied to Spring 2013					
Sacred Heart Univ		Aug 2012 -	Dec 2012		
PRIN. OF HC RESEARCH	A-			3.00	
HEALTH CARE POLICY/ETHIC	B			3.00	
School Total:				6.00	

-----Summer 2013-----					
NURS-G700 THEORET PERSP IN NURSING		B	3.00	9.00	
NURS-G748 HUMAN RESOURCE MANAGEMENT		A	3.00	12.00	

	AHRS	EHRS	QHRS	QPTS	GPA
Current	6.00	6.00	6.00	21.00	3.500
Cumulative	12.00	12.00	6.00	21.00	3.500

-----No Further Entries This Column-----					

COURSE NUMBER	COURSE TITLE	GRADE	HOURS (ATTEMPTED)	QUALITY POINTS	
-----Fall 2013-----					
NURS-G704 ADVANCED ROLE INTEGRATION		A	3.00	12.00	
NURS-G716 MANAGED CARE METHODOLOGIES		A	3.00	12.00	

	AHRS	EHRS	QHRS	QPTS	GPA
Current	6.00	6.00	6.00	24.00	4.000
Cumulative	18.00	18.00	12.00	45.00	3.750

-----Spring 2014-----					
NURS-G712 NURSING FIN RESOURCES I		B	3.00	9.00	
NURS-G740 HEALTH CARE SYSTEMS		A	3.00	12.00	

	AHRS	EHRS	QHRS	QPTS	GPA
Current	6.00	6.00	6.00	21.00	3.500
Cumulative	24.00	24.00	18.00	66.00	3.667

-----Summer 2014-----					
NURS-G732 POPULATION HEALTH MANAGEMENT A			3.00	12.00	

	AHRS	EHRS	QHRS	QPTS	GPA
Current	3.00	3.00	3.00	12.00	4.000
Cumulative	27.00	27.00	21.00	78.00	3.714

-----Fall 2014-----					
NURS-G744 NURSING FIN RESOURCES II		A	3.00	12.00	

	AHRS	EHRS	QHRS	QPTS	GPA
Current	3.00	3.00	3.00	12.00	4.000
Cumulative	30.00	30.00	24.00	90.00	3.750

-----Spring 2015-----					
NURS-G724 OUTCOMES MEASUREM & DATA MGT A-			3.00	11.10	
NURS-G752 HEALTH CARE SYST RESIDENCY B+			3.00	9.90	

	AHRS	EHRS	QHRS	QPTS	GPA
Current	6.00	6.00	6.00	21.00	3.500
Cumulative	36.00	36.00	30.00	111.00	3.700
Requirements completed for Master of Science in Nursing					
-----End of Graduate Nursing Academic Record-----					

KEY: * - COURSE NOT APPLIED TO CURRENT PROGRAM
 ** - INITIAL STATISTICS INCLUDED IN CUMULATIVE STATISTICS
 *** - FOR COURSE WORK TAKEN SPRING AND FALL, TRANSCRIPT MUST BE OBTAINED FROM ADMITTED INSTITUTION. SEE TRANSCRIPT GUIDE.

05-27-20

The cumulative GPA for students graduating prior to Summer 1989 listed in the Degrees Awarded section reflects the combined Loyola and transfer work; the cumulative GPA listed in the semester the student graduated is the Loyola cumulative GPA.

OFFICIAL TRANSCRIPTS BEAR SIGNATURE STAMP AND SEAL

FEDERAL LAW PROHIBITS ACCESS TO THIS RECORD BY ANY PARTY WITHOUT WRITTEN CONSENT OF THE STUDENT.

PAGE 1 OF 1

Helen M. Smith, RN, MSN
 410 Capitol Avenue
 P.O. Box 340308, MS #12HSR
 Hartford CT 06134-0308



Kathy R. Gros Director / Registration Services

NAME: Ezechiel Dominique
STUDENT NUMBER: [REDACTED]

BIRTH

10-28-XXXX

LOYOLA UNIVERSITY
NEW ORLEANS, LOUISIANA
OFFICE OF STUDENT RECORDS

504-865-3237

CEEB - CODE: 006374

COURSE NUMBER	GRADE	CREDIT HOURS	QUALITY POINTS		
Official Doctorate Nursing Academic Record					
Higher Education Institutions:					
Loyola University New Orleans	May 2013	-	May 2015		
Sacred Heart Univ	Aug 2012	-	Dec 2012		
Loyola University New Orleans	Jan 2010	-	May 2010		
St Vincents College	Aug 2003	-	May 2007		
Fairfield University	Aug 2000	-	Dec 2003		
Western Connecticut State Univ	Jan 1996	-	Dec 1999		
Norwalk Conn College	Aug 1993	-	Aug 1999		
Degrees Awarded:					
Doctor of Nursing Practice	May 13, 2017				
Graduate and Professional Studies Loyola University New Orleans					
Major: Post-Master's Nursing, with concentration in Executive Leadership					
Cum GPA: 3.727					
Scholarly Project:					
Establishing a Pain Committee for Improvement in Nursing Pain Assessment					
Master of Science in Nursing	May 9, 2015				
College of Social Sciences Loyola University New Orleans					
Major: Health Care Systems Management					
-----Summer 2015-----					
Admitted Program:					
College of Social Sciences					
Doctor of Nursing Practice					
Major: Post-Master's Nursing					
NURS-G894 SCIENTIFIC WRITING	B	3.00	9.00		
NURS-G900 PHILOSOPHY OF SCIENCE	A	3.00	12.00		
NURS-G905 ETHICS AND SOCIAL JUSTICE	B+	3.00	9.90		
	AHRS	EHRS	QHRS	QPTS	GPA
Current	9.00	9.00	9.00	30.90	3.433
Cumulative	9.00	9.00	9.00	30.90	3.433
-----No Further Entries This Column-----					

COURSE NUMBER	COURSE TITLE	GRADE	HOURS (ATTEMPTED)	QUALITY POINTS	
-----Fall 2015-----					
NURS-G915	EVIDENCE-BASED PRACTICE	B	3.00	9.00	
NURS-G920	BIOSTATISTICS	A	3.00	12.00	
	AHRS	EHRS	QHRS	QPTS	GPA
Current	6.00	6.00	6.00	21.00	3.500
Cumulative	15.00	15.00	15.00	51.90	3.460
-----Spring 2016-----					
NURS-G925	PROG PLAN, EVAL & QUAL MGT	A	3.00	12.00	
NURS-G930	DNP ADVANCED PRACTICUM I	P	3.00		
NURS-G954	ORGANIZATIONAL BEHAVIOR	A	3.00	12.00	
	AHRS	EHRS	QHRS	QPTS	GPA
Current	9.00	9.00	6.00	24.00	4.000
Cumulative	24.00	24.00	21.00	75.90	3.614
-----Summer 2016-----					
Transferred To:					
Graduate and Professional Studies					
Doctor of Nursing Practice					
Major: Post-Master's Nursing					
NURS-G910	EPIDEMIOLOGY	A-	3.00	11.10	
NURS-G940	HEALTH POLICY AND ECONOMICS	A	3.00	12.00	
	AHRS	EHRS	QHRS	QPTS	GPA
Current	6.00	6.00	6.00	23.10	3.850
Cumulative	30.00	30.00	27.00	99.00	3.667
-----Fall 2016-----					
NURS-G945	DNP ADVANCED PRACTICUM II	P	3.00		
NURS-G955	INFORMATICS AND FINANCE	A	3.00	12.00	
NURS-G965	DNP PRACTICUM	P	3.00		
NURS-G967	DIRECTED LEADERSHP PRACTICUM	P	1.00		
	AHRS	EHRS	QHRS	QPTS	GPA
Current	10.00	10.00	3.00	12.00	4.000
Cumulative	40.00	40.00	30.00	111.00	3.700
-----No Further Entries This Page-----					

KEY: * - COURSE NOT APPLIED TO CURRENT PROGRAM
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*** - FOR COURSE WORK TAKEN SPRING AND FALL. TRANSCRIPT MUST BE OBTAINED FROM ADMITTED INSTITUTION. SEE TRANSCRIPT GUIDE.

05-27-20

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FEDERAL LAW PROHIBITS ACCESS TO THIS RECORD BY ANY PARTY WITHOUT WRITTEN CONSENT OF THE STUDENT.

PAGE 1 OF 2

Helen M. Smith, RN, MSN
410 Capitol Avenue
P.O. Box 340308, MS #12HSR
Hartford CT 06134-0308



Kathy R. Gros

Kathy R. Gros Director / Registration Services

WESTERN CONNECTICUT STATE UNIVERSITY

OFFICE OF THE REGISTRAR
DANBURY, CT 06810

Student No: [REDACTED]

27-MAY-2020

Record of: Ezechiel Dominique

Current Name: Ezechiel Dominique

Issued To: Helen M. Smith, RN, MSN
Parchment: 28501072
Certified eTranscript

Course Level: Undergraduate

Current Program

Bachelor of Bus Admin

Program : BBA Management Inform Systems

College : Ansell School of Business

Major : Management Information Systems

Maj/Concentration : MIS Major

Comments:

Institutions Attended:

Norwalk Comm-Tech College (28.0)

*FR 299 = L'Oeure de Charles Baudelaire

Degree Awarded: Bachelor of Bus Admin 15-JAN-2000

Major : Management Information Systems

Maj/Concentration : MIS Major

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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TRANSFER CREDIT ACCEPTED BY THE INSTITUTION:

Spring 1996

System Conversion

CHE 100	Concepts of Chem	4.00	T
ENG 145	Engl Composition I	3.00	T
MAT 991	General Ed Elective	3.00	T
REG 100	Free Elective	6.00	T
Ehrs: 16.00 GPA-Hrs: 0.00 QPts: 0.00 GPA: 0.00			
Cum.	Ehrs: 16.00 GPA-Hrs: 0.00 QPts: 0.00 GPA: .00		

Spring 1999

System Conversion

ACC 202	Managerial Acct'g	3.00	T
Ehrs: 3.00 GPA-Hrs: 0.00 QPts: 0.00 GPA: 0.00			
Cum.	Ehrs: 19.00 GPA-Hrs: 0.00 QPts: 0.00 GPA: .00		

Summer 1999

System Conversion

ART 101	Hist, Apprec Art II	3.00	T
ECO 100	Princ of Macroecon	3.00	T
ECO 101	Princ of Microecon	3.00	T
Ehrs: 9.00 GPA-Hrs: 0.00 QPts: 0.00 GPA: 0.00			
Cum.	Ehrs: 28.00 GPA-Hrs: 0.00 QPts: 0.00 GPA: .00		

INSTITUTION CREDIT:

***** CONTINUED ON NEXT COLUMN *****

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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Institution Information continued:

Spring 1996

CHE 110	General Chemistry I	4.00	W	0.00
CS 100	Fndmntls of Comput	3.00	B	9.00
CTA 152	Interpers Communic	3.00	B-	8.01
ENG 146	Eng Composition II	3.00	A-	11.01
PSY 100	Intro Psychology	3.00	A	12.00
Ehrs: 12.00 GPA-Hrs: 12.00 QPts: 40.02 GPA: 3.33				
Cum.	Ehrs: 12.00 GPA-Hrs: 12.00 QPts: 40.02 GPA: 3.33			

Fall 1996

BIO 103	General Biology I	4.00	B	12.00
CHE 110	General Chemistry I	4.00	B	12.00
FR 103	Audio-Ling Fre III	3.00	A	12.00
FR 299	Stdt Developd Study	3.00	A	12.00
HSC 201	Comm'ty Hlth Agency	1.00	W	0.00
MET 001	Intro to Med Techn	0.00	P	0.00
PE 118	Volleyball I	0.50	B	1.50
SOC 100	Intro to Sociology	3.00	C+	6.99
Ehrs: 17.50 GPA-Hrs: 17.50 QPts: 56.49 GPA: 3.22				
Cum.	Ehrs: 29.50 GPA-Hrs: 29.50 QPts: 96.51 GPA: 3.27			

Spring 1997

BIO 104	General Biology II	4.00	B	12.00
CHE 111	General Chemistry II	4.00	C	8.00
CS 124	Spreadsheets	1.00	P	0.00
ENG 336	Lit of the Bible	3.00	B	9.00
MAT 133	Precalculus	3.00	C-	5.01
PE 110	Weight Training	0.50	A	2.00
PE 120	Soccer	0.50	A	2.00
Ehrs: 16.00 GPA-Hrs: 15.00 QPts: 38.01 GPA: 2.53				
Cum.	Ehrs: 45.50 GPA-Hrs: 44.50 QPts: 134.52 GPA: 3.02			

Summer 1997

BIO 105	Anat & Physiol I	4.00	C	8.00
BIO 106	Anat & Physiol II	4.00	B	12.00
Ehrs: 8.00 GPA-Hrs: 8.00 QPts: 20.00 GPA: 2.50				
Cum.	Ehrs: 53.50 GPA-Hrs: 52.50 QPts: 154.52 GPA: 2.94			

Fall 1997

BIO 215	Microbiology	4.00	D	4.00
BIO 312	Genetics	4.00	W	0.00

***** CONTINUED ON PAGE 2 *****

Alterations of this transcript may be a criminal offense. In accordance with the Family Educational Rights and Privacy Act of 1974, this information may not be released to any party without the student's written consent.

Keith R. Gauvin
Keith R. Gauvin, Registrar

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WESTERN CONNECTICUT STATE UNIVERSITY

OFFICE OF THE REGISTRAR
DANBURY, CT 06810

Student No: [REDACTED]

27-MAY-2020

Record of: Ezechiele Dominique

SUBJ NO. COURSE TITLE CRED GRD PTS R

Institution Information continued:

CHE 210 Organic Chemstry I 4.00 W 0.00
Ehrs: 4.00 GPA-Hrs: 4.00 QPts: 4.00 GPA: 1.00
Cum. Ehrs: 57.50 GPA-Hrs: 56.50 QPts: 158.52 GPA: 2.80

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

	Earned Hrs	GPA Hrs	Points	GPA
TOTAL INSTITUTION	119.00	117.00	338.48	2.89

TOTAL TRANSFER	28.00	0.00	0.00	0.00
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OVERALL	147.00	117.00	338.48	2.89
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***** END OF TRANSCRIPT *****

CUM - cumulative

Spring 1998

ACC 201 Financial Acct'g 3.00 C+ 6.99
FIN 220 Business Stat I 3.00 C 6.00
MIS 260 Info Systms Cncpts 3.00 B+ 9.99
MKT 301 Princ of Marketing 3.00 B- 8.01
PE 129 Swimming I 0.50 A 2.00
PSY 215 Psy of Personality 3.00 W 0.00
Ehrs: 12.50 GPA-Hrs: 12.50 QPts: 32.99 GPA: 2.63
Cum. Ehrs: 70.00 GPA-Hrs: 69.00 QPts: 191.51 GPA: 2.77

Fall 1998

FIN 221 Business Stat II 3.00 C 6.00
MIS 405 Bus Appl Microcomp 3.00 A 12.00
MIS 475 Mgmt of Info Systm 3.00 B+ 9.99
MIS 481 Mgmt Info Systems 3.00 B- 8.01
Ehrs: 12.00 GPA-Hrs: 12.00 QPts: 36.00 GPA: 3.00
Cum. Ehrs: 82.00 GPA-Hrs: 81.00 QPts: 227.51 GPA: 2.80

Spring 1999

CS 280 Cobol I 3.00 B 9.00
FIN 310 Princ of Finance 3.00 C+ 6.99
MGT 320 Operations Mangmnt 3.00 B+ 9.99
MIS 385 Fndmntls Data Comm 3.00 A 12.00
MIS 495 Seminar in MIS 3.00 B 9.00
Ehrs: 15.00 GPA-Hrs: 15.00 QPts: 46.98 GPA: 3.13
Cum. Ehrs: 97.00 GPA-Hrs: 96.00 QPts: 274.49 GPA: 2.85

Fall 1999

CED 297 Cooperative Educ 1.00 P 0.00
CS 143 Visual BASIC 3.00 B 9.00
HUM 102 Art and Experience 3.00 B 9.00
JLA 240 Commercial Law 3.00 C+ 6.99
MGT 250 Organiz'l Behavior 3.00 B 9.00
MGT 415 Strategy & Policy 3.00 B+ 9.99
MIS 341 Info Syst Security 3.00 A- 11.01
PS 104 Wrld Govt, Ecos&Cul 3.00 B 9.00
Ehrs: 22.00 GPA-Hrs: 21.00 QPts: 63.99 GPA: 3.04
Cum. Ehrs: 119.00 GPA-Hrs: 117.00 QPts: 338.48 GPA: 2.89

***** CONTINUED ON NEXT COLUMN *****

Alterations of this transcript may be a criminal offense. In accordance with the Family Educational Rights and Privacy Act of 1974, this information may not be released to any party without the student's written consent.

Keith R. Gauvin
Keith R. Gauvin, Registrar

WESTERN CONNECTICUT STATE UNIVERSITY

ACCREDITATION: Western Connecticut State University is accredited by the New England Association of Schools and Colleges, Inc. through its Commission on Institutions of Higher Education. Additional and program accreditation by:

The Connecticut Board of Regents of Higher Education
The Connecticut State Department of Education
The American Chemical Society
The Council for Accreditation of Counseling and Related Educational Programs
The Council on Social Work Education
The Commission on Collegiate Nursing Education
The National Association of Schools of Music
The National Council for Accreditation of Teacher Education

CREDIT HOUR: A semester hour of credit is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than:

1. One hour of classroom or direct faculty instruction and a minimum of two hours of out-of-class student work each week for approximately fifteen weeks;
2. or the equivalent amount of work over a different amount of time;
3. or at least an equivalent amount of work as required in paragraph 1 of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work and other engaged academic time leading toward the award of credit hours.

COURSE NUMBERS AND TITLES: In the past there have been numerous changes and adjustments in the curriculum and course offerings. For this reason many of the course numbers have been changed. It is therefore advisable to consider only course titles, and not course numbers in evaluating or interpreting this transcript as the same number may be assigned to two different courses. Where duplicate course numbers exist and appear to be in error, please disregard the number and depend entirely on the course title. All graduate level courses are numbered in the 500, 600, 700 or 800's.

Explanation of Marking System (The following letter grade system is used)

A	4.0	D+	1.33	INC	Incomplete
A-	3.67	D-	.67	T	Transfer
B+	3.33	F	0.0	RM	Remediate
B	3.0	P	Passed	RP	Repeat
B-	2.67	FP	Failure (P/F Course)	W	Withdrawn
C+	2.33	E	Credit by Exam	WF	Withdrawn Failing
C	2.0	AUD	Audit	X	University Challenge Exam Credit
C-	1.67				

Cumulative averages do not reflect courses earning credit with a grade of "P." Graduate students may earn a grade of D+ and undergraduate students may be graded D-.

Repeated courses are indicated by the letter 'E' (exclude) or the letter 'I' (include) under the column marked 'R'. Excluded courses are not included in either the semester total or in the cumulative GPA.

REQUIREMENTS FOR GRADUATION: Students are eligible for the bachelor or associate degree upon successful completion of general education, the major, and total credit requirements for that degree. A cumulative grade point average of 2.0 or higher for all credits attempted at Western is required for graduation, as well as a grade point average of 2.0 or higher in all courses for the major. Certain programs have a higher minimum standard. In addition, at least 30 credits and at least half of the major requirements must be completed at Western. A cumulative grade point average of 3.0 or higher for all credits attempted in graduate programs at Western is required for graduation.

SIXTH YEAR PROGRAM: The Sixth Year Professional Diploma of Advanced Study provides opportunity for experienced and qualified candidates to pursue a planned program of advanced graduate work beyond the Master's Degree and to develop additional competency in an area of specialization.

TO EARN A RECOMMENDATION FOR A TEACHING CERTIFICATE: All education majors in academic fields are required to complete 12 semester hours of professional laboratory experience. The professional laboratory experience is graded on a pass/fail basis. Elementary Education Majors in the Interdisciplinary program complete a full year of residency in their senior year.

Student No:

Date Issued: 28-MAY-2020
EXTL

Record of: Ezechiel Dominique

Page: 1



Issued To: HELEN M. SMITH RN MSN
410 CAPITOL AVENUE
PO BOX 340308 MS #12HSR
HARTFORD, CT 06134-0308

Course Level: Graduate

Program of Study

College : Egan School of Nursing/Health

Major : Nursing

Maj/Concentration : PMHNP Across the Lifespan

Degree Awarded: Master of Science 15-JAN-2004

College : School of Engineering

Major : Software Engineering

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
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INSTITUTION CREDIT:

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
Fall 2000			
GK 0415	Information Systems	3.00 B+	9.99
GK 0420	TechMgmt:Concepts,Prin&Issues	3.00 A-	11.01
Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 21.00 GPA: 3.50			

Spring 2001			
IM 0430	Network Concepts	3.00 A-	11.01
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 11.01 GPA: 3.67			

Summer 2001			
SW 0596	Network Routing & Switching	3.00 A-	11.01
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 11.01 GPA: 3.67			

Fall 2001			
SW 0597	LAN/WAN Engineering	3.00 B-	8.01
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 8.01 GPA: 2.67			

Spring 2002			
SW 0507	Network Operating System	3.00 B	9.00
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 9.00 GPA: 3.00			

***** CONTINUED ON NEXT COLUMN *****

SUBJ NO.	COURSE TITLE	CRED GRD	PTS R
----------	--------------	----------	-------

Institution Information continued:

Fall 2002			
SW 0402	Database Concepts Oracle	3.00 B	9.00
SW 0599	Network Sec:Attacks&Countermsr	3.00 A-	11.01
Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 20.01 GPA: 3.34			

Spring 2003			
SW 0403	Visual Programming	3.00 B+	9.99
SW 0550	Professional Project (MSSE)	3.00 A	12.00
Ehrs: 6.00 GPA-Hrs: 6.00 QPts: 21.99 GPA: 3.67			

Summer 2003			
SW 0551	Professional Project(MSSE) II	3.00 A-	11.01
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 11.01 GPA: 3.67			

Fall 2003			
SW 0502	Software Engineering Practices	3.00 B-	8.01
Ehrs: 3.00 GPA-Hrs: 3.00 QPts: 8.01 GPA: 2.67			

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

	Earned Hrs	GPA Hrs	Points	GPA
TOTAL INSTITUTION	36.00	36.00	121.05	3.36
TOTAL TRANSFER	0.00	0.00	0.00	0.00

OVERALL	36.00	36.00	121.05	3.36
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***** END OF TRANSCRIPT *****

This officially sealed and signed transcript is printed on red SCRIP-SAFE security paper with the name of the university printed in white type across the face of the document. A raised seal is not required. When photocopied a security statement containing the institution name will appear. A BLACK ON WHITE OR A COLOR COPY SHOULD NOT BE ACCEPTED.

In accordance with USC 438 (6) (4) (8) (the Family Educational Rights and Privacy Act of 1974) you are hereby notified that this information is provided upon the condition that you, your agent or employees will not permit any other party access to this record without consent of the student. Alteration of this transcript may be a criminal offense.

Lynn M. Kohm, University Registrar

TO VERIFY: TRANSLUCENT GLOBES MUST BE VISIBLE FROM BOTH SIDES OF TRANSCRIPT WHEN HELD TOWARD A LIGHT SOURCE

EXPLANATORY LEGEND AND AUTHENTICITY STATEMENT APPEAR ON REVERSE SIDE

June 4, 2020

Dear Board of Examiners for Nursing,

This letter is being submitted on behalf of the UConn School of Nursing Accelerated CEIN BS program at your request for a plan of correction to address a recent drop below the 80 percent first-time pass rate at the Stamford campus. Historically, our pass rates have been high at each of our four campuses, most recently 92-100%. After reviewing the candidates included in the National Council of State Boards of Nursing and Pearson Vue, who did not pass the NCLEX in early 2020, we discovered several key data.

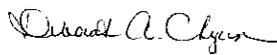
Unfortunately, last year among the small cohort of twenty-seven candidates who tested between May 1, 2019, and April 30, 2020, six did not pass on their first attempt. Of these six candidates, five graduated in December 2019, and one graduated in December 2018, but waited until July 2019 to test. This latter student had numerous life extenuating circumstances that led to her delay in being able to schedule the test sooner. Other data showed that five candidates had cumulative undergraduate GPAs between 3.01 and 3.12, and one had a cumulative GPA of 3.7. Of note, all candidates had a cumulative prerequisite GPA above 3.33 before admission into the CEIN BS program. Compared to the rest of their cohort, these six candidates had difficulty with the standardized testing throughout the program, two had extreme test anxiety, and all demonstrated low scores on their Assessment Technologies Institute (ATI) proctored exams. Based on the ATI Comprehensive Predictor Exam, taken in their final semester, they all showed a low predicted probability of passing the NCLEX on their first attempt.

In response to the data reviewed, we will implement the following plan and strategies to improve the first-time NCLEX pass rates with future cohorts:

1. Closely monitor and document benchmarks for overall score (60% or greater) and subscale scores (65% or higher) on all proctored ATI exams each semester.
2. Faculty currently work closely with their assigned advisee, and they will continue to work with students to support their NCLEX preparation throughout the program, especially in "high-risk" students.
3. Continue to require remediation and focused reviews of content areas for all missed exam questions for ATI Practice B, and proctored exams.
4. Offer and expect all students to take two versions of the ATI comprehensive predictor exams during the final semester. Students will remediate each exam before taking a subsequent exam.

5. If a student earns a predicted probability score of less than 85% on ATI Comprehensive Predictor after their second attempt, we will recommend they complete the third exam after the three-day, comprehensive ATI review course. This review course is usually scheduled the week following commencement.
6. Integrate assigned and student created ATI Board Vitals Computer adaptive testing throughout the final semester.
7. Make available ATI practice exams and ATI Board Vitals at program completion to support ongoing NCLEX preparation.
8. Offer remediation and support to candidates who have not taken the NCLEX within three months after graduating.
9. Encourage all graduates to take the NCLEX within four to six weeks of graduation.
10. Recommend to students an additional review course before they schedule their NCLEX if they anticipate not taking it within the recommended time frame.

Sincerely,



Deborah A Chyun, PhD, RN, FAHA, FAAN
Professor and Dean



May 15, 2020

Ms. Helen Smith, Nurse Consultant
State of Connecticut
Department of Public Health
410 Capitol Avenue
PO Box 340308
Hartford, CT 06134

Dear Ms. Smith and Board of Examiner for Nursing:

This letter is a response regarding the NCLEX May 1, 2019, to April 30, 2020, results for the West Haven Practical Nurse (PN) Day Program falling below 80% for first time testers with 58 out of 119, yielding a pass rate of 49% and results for the East Hartford Practical Nurse (PN) Day Program falling below 80% for first time testers with 63 out of 88, yielding a pass rate of 72%.

The following action plan has been developed and is being implemented. The plan focuses on two key areas: Policy and Academics.

Policy

The final course of the Practical Nursing Program, Seminar 111 has been modified to include integration of the Virtual Assessment Technologies Institute (VATI) program. During the Virtual-ATI NCLEX Review, all students will be enrolled and required to complete a pre-graduation review, including completion of the NCLEX strategies, fundamentals, pharmacology and medical surgical modules. The Virtual-ATI remediation program assigns each student a coach; each student follows the coach's individualized plan. At the end of the remediation program, if the student has successfully completed all remediation requirements, the student is provided with a "green light" status to sit for the NCLEX. The enrollment fee of \$240.00 is paid for by Stone Academy.

The remediation policy associated with Nursing Seminar II (SEM 102), which is the final course of the program, was modified in January of 2018. The original policy was students who did not achieve the 90% benchmark on the ATI Comprehensive Predictor during Nursing Seminar II were enrolled in the 12-week Virtual ATI (VATI) remediation program. The enrollment fee was covered by Stone Academy. The VATI remediation program assigns each student a coach; each student follows the coach's individualized plan. At the end of the remediation program, students enrolled in VATI return to school for the administration of a proctored Comprehensive Predictor.

As of January 2018, the policy was modified to add an additional opportunity for students who were unsuccessful in passing the proctored predictor taken at Stone Academy after the 12 weeks of VATI. This policy allows students to re-enroll in a 12-week VATI remediation extension with the opportunity to earn "green light status." Any Comprehensive Predictor Assessments assigned

to the students during the VATI remediation extension will be completed at Stone Academy in a proctored environment.

Academic

Weekly “At Risk” Reports are generated by the PN Site Administrator. The report includes any student who has a course average less than 73% and the reason why a student may be at risk, i.e. subject matter challenges and absences. Discussions along with action plans are created by the course instructor and the Site Administrator. At Risk students are closely monitored and have meetings with the course instructor, and Practical Nursing Site Administrator to help guide the students to success and meet the minimum course grade requirement of 73%. Additionally, each PN Site Administrator will monthly generate a campus specific report detailing each student's progress in ATI Proficiency level and Percentage Probability of pass rate regarding the NCLEX.

Significant progress has been made to work towards achieving uniformity in the curriculum across the campuses. Each campus has identified Academic Course Advisors to facilitate success for every student in every course. The Academic Course Advisors work with the student to identify areas within the course content that may be causing challenges for the student. The Academic Course Advisors are required to discuss the challenges with the instructor, which in turn provides the instructor with detailed insight of each student who may be faced with academic challenges. Interventions are set forth by the instructor, while maintaining shared communication with the Site Administrator. Interventions include tutoring, additional academic resources, supplemental materials.

A new learning product, adaptive quizzing was recently implemented in January of 2018. The adaptive quizzing is an alternative form of learning that is individualized according to the student's learning needs. Greater emphasis is being placed on Silvestri's NCLEX-PN Review book using the adaptive quizzing feature starting in Fundamentals and through the Medical Surgical courses. Time is set aside during both classroom and clinical days for the practicing of NCLEX review questions along with answers, rationale and test taking skills.

The COVID-19 global pandemic has been a challenge for many of our students. The transition to distance learning has offered many challenges. In order to meet proctored exam challenge as required by ATI, Stone Academy purchased a remote proctoring service, Proctorio. The software service allows the instructor to proctor the student exam, as normal, but the software provides many security features such as browse tabs disabled, block download abilities, video record of test take, monitoring of test taker actions and many other security features. It also provides both video and audio-based verification as well as student ID check capabilities. This additional security features allow insurance of the integrity of the exam. Providing the student with continued access to proctored exams in their courses to further support their success.

Beginning October 2018, the new curriculum approved in March 2018 by the Board of Examiners for Nursing was implemented across the three campuses.

New curriculum highlights include the following:

- Increase in total program hours, almost by 500 hours (1560 to 2050 hours).
- Increase in clinical hours, total 880 hours.

- Increase clinical hours where students have the ability to practice medication administration (360 to 540 hours).
- Redesign of the 24-hour Maternity/Newborn course to 90-hour Maternal/Child course by incorporating the pediatric content from all Medical Surgical courses and renaming the course Maternal/Child.
- Increase cumulative hours for all four levels of the Medical Surgical courses as well as the removal of the pediatric content (317 to 360 hours).

Once students have taken their first proctored ATI exam, an explanation is provided by the course instructor on interpretation of the results. The students are given a pathway to study that includes use of the focused review, assigning priority to their weakest areas, and narrowing down content to more manageable, understandable concepts. Proctored ATI exams are taken on a regular basis. The proctored ATI exams are used to simulate the experience the students will encounter when taking the NCLEX. Time is set aside during both classroom and clinical days for the practicing of NCLEX review questions along with answers, rationale and test taking skills.

Stone Academy has allowed instructors to complete an extensive training on the implementation of ATI products. The Nursing Seminar II (SEM112) course has been reconfigured to include weekly ATI proctored exams followed by immediate remediation. The 16-week scheduling gap between clinical and the exit exam has been closed through the restructuring of the last 4 weeks of the semester.

In the Spring of 2019, the West Haven and East Hartford campus added additional faculty both in the classroom and clinical arrangement. We have added faculty mentors to coach our new faculty on how to implement innovative teaching methods, creative approaches to classroom management techniques and improving the overall classroom environment. An additional Clinical Supervisor provides support to the clinical faculty and students who are engaged in clinical rotations. The Assistant Programs Manager allows added support for students who may require academic reinforcement while learning.

By addressing the needs of the adult learner and implementing the changes, it is anticipated that students will meet or exceed the 80% standard for passing the NCLEX-PN.

Sincerely,

Terry and Linda

Terry Kinsley, MSN
 Practical Nursing Program Administrator
 Stone Academy
 East Hartford, Waterbury, West Haven
 Tkinsley@stone.edu

Linda Dahlin, MS
 Provost
 Stone Academy
 East Hartford, Waterbury, West Haven
 Ldahlin@stone.edu



May 29, 2020

Ms. Helen Smith, Nurse Consultant
 State of Connecticut
 Department of Public Health
 410 Capitol Avenue
 PO Box 340308
 Hartford, CT 06134

Dear Ms. Smith and Board of Examiners for Nursing,

As we all know, the global pandemic as a result of COVID-19, has interrupted the status quo for all nursing students. Stone Academy successfully transitioned to the virtual classroom environment in mid-March. All students were provided with the technology tools needed to successfully achieve theoretical outcomes of learning. Most severely impacted was the ability of Practical Nursing students to continue their clinical experience. The delay of return to clinical will push back graduation dates for most of our students. Providing an alternative clinical experience for a small percentage of the required hours would give the students a head-start on meeting the required hours of the direct client care experience. Stone Academy has cushioned the required clinical course hours with an additional 130 hours above the required hours as defined by state regulations. On behalf of Stone Academy, I am requesting temporary waiver of Sec. 20-90-55 (c) that requires contact hours shall be in supervised direct client care experiences to allow for 25% of the hours for select clinical rotations as outlined below to be completed using a virtual clinical alternative on select campuses:

- Waterbury 1 Day Cohort, 1 Evening Cohort
 - Requesting 25% of required 240 hours to be used for virtual clinical
- West Haven: 2 evening cohorts
 - Requesting 25% of each required hours to be used for virtual clinical
- East Hartford: 2 evening cohorts
 - Requesting 25% of each required hours to be used for virtual clinical

Campus	Cohort	Clinical Course	Course Required Hours	Hours Completed	Requesting
Waterbury	04.2019 Day	CLN115	240 hours	0	60 hours
	10.2018 Evening	CLN115	240 hours	0	60 hours
West Haven	04.2018 Evening	CLN105	228 hours	135	17 hours
	10.2018 Evening	CLN115	240 hours	0	60 hours
East Hartford	04.2018 Evening	CLN105	228 hours	123	17 hours
	10.2018 Evening	CLN115	240 hours	0	60 hours



The current curriculum allows for the use of technology as a teaching strategy to meet course objectives and outcomes of learning. Students have used ATI throughout their theoretical course work. Using *Real Life Clinical Reasoning Scenarios*, the students will be provided with the opportunity to practice clinical reasoning skills. Students experience life-like clinical situations using video and other forms of rich media. Clinical decision points are integrated with video segments, requiring students to identify the response the nurse should make. Student choices direct the path of the experience so that each student experiences the consequences of their decisions. Real Life ensures that students are exposed to clients with declining status, experiencing real emergencies. It will require students to reason their way through complex clinical situations they would most likely not encounter in a clinical environment. Students must prepare for the experience much as they would for a clinical day, then work individually, in small groups, and finally as a class to experience the scenario. Please see attachment A for an overview of the plan for the virtual clinical experience.

Kind regards,

Terry Kinsley

Terry Kinsley, MSN
Practical Nursing Program Administrator
Stone Academy
East Hartford, Waterbury, West Haven



Appendix A

Module Learning Outcomes NLN Competencies

- Human Flourishing
- Nursing Judgment
- Professional Identity
- Spirit of Inquiry

Participant Learning Outcomes:

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

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

Pre-Clinical Assignment

The student will review content related to the topic of the assigned scenario and complete the following sections on the System Disorder Active Learning Template”

- Pathophysiology related to the client problem
- List anticipated findings based on the patient scenario (4 sections)
- Client-centered care: list anticipated activities (medications, therapeutic procedures, interprofessional care)
- Complications
- Review nursing skills videos appropriate to system disorder

The student will create an anticipated Plan of Care (POC) for a client experiencing the condition in the scenario including the following:

- Priority: anticipate Nursing Diagnosis to be assigned for client care
- Client education – health promotion and disease prevention
- Safety considerations
- Client Centered Care: using evidenced based interventions
- Complete Active Learning Templates for all medications
- Complete therapeutic communication tool
- Discuss diagnostic techniques appropriate to scenario

Appendix A

Student tasks during each of the Real-Life Scenarios

As the scenario begins, the student will take report by stopping and replaying the scenario as needed. The student will document their report on the designated section of the scenario worksheet.

After report, the student will document the following items on the scenario worksheet:

- Identify and prioritize the top three client problems noted from the report
- List objective and subjective data 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
- Prepare a SBAR report to give to the oncoming nurse

Debriefing

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 an incorrect decision was made during the scenario, what led the participant down an incorrect path?
4. Describe 3 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 the 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.

Submission of assignments and final debriefing:

All assignments will be reviewed and discussed during post conference via zoom meeting with all participants and instructor. Each participant will submit all designated assignments by end of each clinical day. Assignments will be delivered to instructor via email.

Evaluation Procedure for clinical component:

Each real life scenario will be evaluated based on ATI score report and assignments submitted, 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)
- Participation in pre and post conference



Appendix A

Course completion

Participants must satisfactorily complete each scenario. All assigned work must be completed and submitted on time. Participant must receive a Satisfactory score on all written assignments. Each participant must complete all the required hours to satisfactorily pass this clinical course.

June 4, 2020

Dept. of Public Health,
410 Capitol Avenue,
PO Box 340308, MS#12HSR
Hartford, CT 06134-0308

Dear Ms. Bouffard and Board members.

Please find attached for review and consideration, the Corrective Action Plan for Porter and Chester Institute to address the NCLEX pass rates for the campuses outlined in your letter, electronically received on May 21, 2020.

Sincerely,



Debra Hessell MSN Ed
Acting Director of Nursing

dhessell@porterchester.com

Porter and Chester Institute - Response to NCLEX Pass rates

Corrected Information

Following a review of the NCLEX outcomes report, forwarded by Ms. Smith on behalf of NCBSN, Porter and Chester submitted a request for corrections to be made to the Rocky Hill day session and, the Stratford evening session. At the time of writing (June 4, 2020), these changes have not yet been confirmed by the NCBSN.

Rocky Hill Campus

Six students from the evening program had incorrectly utilized the day program code on their initial exam attempt.

- Of these six students two were first attempt pass and four were first attempt fail.
- We believe that this changes the first time pass rate for the Rocky Hill day program (US69102500) to 83% and the first time pass rate for the Rocky Hill evening program (US69110600) to 54%.
- The change to the day session, will now bring them into compliance as this was originally reported by the NCBSN at 70%.

Stratford Campus

Two students from the day program had incorrectly utilized the evening program code on their initial exam attempt.

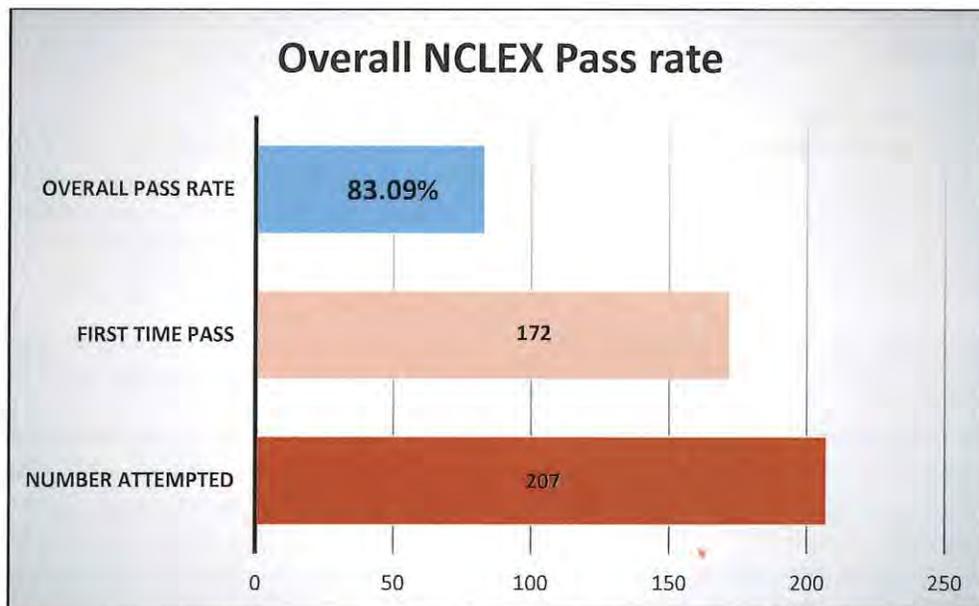
- Both of these students were first attempt pass.
- We believe that this changes the first time pass rate for the Stratford day program (US69101500) to 87% and the first time pass rate for the Stratford evening program (US69110500) to 73%.

Program code

Currently, each session of the PN program at Porter and Chester has their own program code. The reason for this was that programs opened at different campuses at different times. The PN program curriculum and the length of the program is the same for all 5 campuses and as such, the collective NCLEX-PN® were evaluated.

In reviewing the collective outcome, to include all sections and all campuses, the collective NCLEX-PN® outcome for Porter and Chester Institute is 83.09%. This number is based upon 207 first time attempts, and 172 first time pass (see diagram below). This finding raised an internal discussion regarding the feasibility of consolidating the program codes into 1 collective code for all campuses and shifts.

$$172 \text{ first time pass} \div 207 \text{ first time attempts} = 83.09\% \text{ Overall PCI pass rate}$$



The feasibility of consolidating the 10 program codes into 1 program code was discussed with the NCBSN on Friday May 29, 2020 with Ms. Courier. She stated that it is possible to have 1 program code and that Porter and Chester would need to petition the Board for this. A formal request for this is included as **exhibit 1**.

Corrective Action Plan

Prior corrective measures recap

In response to its 2018-2019 NCLEX exam reports, Porter and Chester Institute introduced a number of revised actions in an attempt to improve program outcomes. Said action plans were presented to the Board and were subsequently approved.

The Seminar course is taken during the student's final term. It revisits all information learned within the program and prepares the student for their NCLEX-PN® exam. This course was revised in July 2018 with the anticipated outcome improvements been seen in 2020.

The Health Education Systems Incorporated (HESI) two-day Live Review course was added into the Seminar course in September 2019 in an effort to address the 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. In addition to this change, the number of NCLEX-PN® review practice questions were increased within the program content.

Overview of outcome

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, thus demonstrating a significant improvement over those graduates who sat for their NCLEX-PN® prior to the September implementation date.

It was 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.

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 as demonstrated in the information above.

Porter and Chester Institute has evaluated the online review courses from both Elsevier and ATI.

- The ATI review course 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® course 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.

- This virtual review is similar to its Live Review counterpart, the HESI / Saunders Online Review and as such, will provide our PN students a faculty guided, 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 copy of the revised course syllabus is attached as **exhibit 2**.

To better serve our students, we will continue with the 2-day Live Review course however, we will switch to the virtual live review which will be delivered in real-time via Zoom. This will be facilitated by Elsevier and will contain all the elements that the in-person Live Review contained. The course will be offered over 2 days and 3 nights for evening students. In short, the combination of the faculty guided HESI / Saunders Online Review and the Virtual Live Review course, will give students access to two different versions of the review course, thus increasing their chances of a positive outcome.

Exam fees

Another factor identified that impacts NCLEX-PN® success is the length of time between program completion and, scheduling the exam. Many graduates are not in a position to pay out of pocket for the collective examination fees.

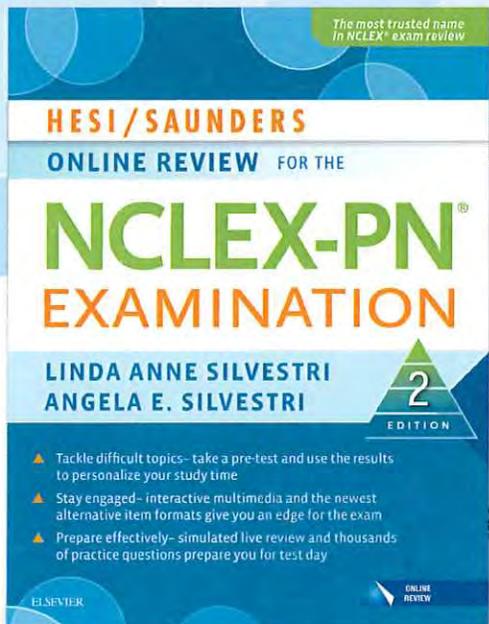
Presently, the PearsonVue and state NCLEX-PN® examination fees are not included within the student service fees which potentially can cause a delay in the graduate applying for the licensure exam and having a direct impact on the momentum and motivation of the graduate. Porter and Chester Institute will 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.

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

Timeline for PN2402 Course Improvements

Date	Action/Change	Expected impact
July 2018	PN2402 Practical Nurse Seminar course revised	2020
September 2019	Addition of HESI Live Review Course to PN2402 1. 2 day NCLEX prep course, hosted by Elsevier 2. Integration of NCLEX questions for all chapters covered in program courses	1. October 2019 graduating class 2. October 2020 graduating class
July 2020	PN2402 Practical Nurse Seminar course revised 1. Course text changed to the HESI/Saunders Online Review for the NCLEX-PN® 2. A virtual 2 day (3 evenings) Live Review will be scheduled towards the end of the Seminar course to be delivered via Zoom	October 2020 graduating class** **graduation date subject to change due to clinical site availability due to COVID-19 issue at the time of writing
July 2020	For all new students entering the PN Program, the PearsonVue and state NCLEX-PN® examination fees will be included within student fees	

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

April 2018

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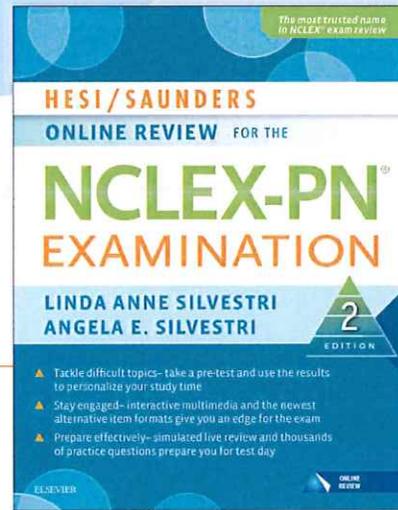


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18-NHPmr-0018 TM/AF 2/18

EXHIBIT 1

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

June 4, 2020

Dear Ms. Bouffard.

Upon the advice received from Ms. Courier from the National Council of State Boards of Nursing, I am requesting on behalf of Porter and Chester Institute, that the Connecticut Board of Examiners for Nursing, give consideration for our application to consolidate our 10 NCLEX-PN® program codes into 1 program code.

We thank you and the Board members for their consideration in this matter.

Sincerely,



Debra Hessell, MSN
Acting Director of Nursing

EXHIBIT 2

Course Syllabus

Course title:	Practical Nursing Seminar PN2402
Course length:	77 Clock Hours 5 Quarter Credit Hours
Estimated outside work	18 Hours

Prerequisite: Successful completion of all previous terms' coursework

Course Description:

Students will prepare for the NCLEX-PN® examination by reviewing all previous course content, by fine tuning test-taking skills, and by participating in practice NCLEX-PN® examinations. Students will continue to refine critical thinking, leadership, management, delegation, and prioritization skills.

Course Objectives:

Upon successful completion of this course, the student will be able to:

- Demonstrate competence in NCLEX-PN® practice examinations
- Master the fundamentals of effective test-taking skills
- Recall all course content related to fundamental nursing, medical-surgical nursing, geriatric nursing, mental health nursing, maternal-child nursing, nutrition, pharmacology, and management
- Explain the concepts and processes fundamental to the practice of nursing to include the nursing process, critical thinking, prioritization, delegation, effective/therapeutic communication, and documentation
- Review the legal and ethical aspects of nursing
- Discuss the cultural and spiritual elements of client care
- Identify and discuss the competencies and leadership role of the practical nurse
- Understand all components of the NCLEX-PN® Detailed Test Plan

Required Textbooks:

deWit, S., Stromberg, H., & Dallred, C. (2017). *Medical-surgical nursing: Concepts and practice* (3rd ed.)

Knecht, P. (2017). *Success in practical/vocational nursing: From student to leader* (8th ed) St. Louis, Missouri: Elsevier

Leifer, G. (2019). *Introduction to maternity and pediatric nursing* (8th ed.) St. Louis, Missouri: Elsevier

Morrison-Valfre, M. (2017) *Foundations of mental health care* (6th ed.) St. Louis, Missouri: Elsevier

Thibodeau, G. A. & Patton, K. T. (2016). *Structure and function of the body* (15th ed.). St. Louis, Missouri: Mosby.

Vallerand, A. H., Sanoski, C. A. (2020). *Davis's drug guide for nurses* (16th ed.) Philadelphia: F.A. Davis Company.

Van Leeuwen, A.M. & Bladh, M.L. (2019). *Davis's comprehensive handbook of laboratory and diagnostic tests with nursing implications* (8th ed) Philadelphia: F.A. Davis Company

Visovsky, C. (2019). *Introduction to clinical pharmacology* (9th ed.) St. Louis, Missouri: Elsevier/Mosby

Williams, P. (2016). *Basic geriatric nursing* (6th ed.). St. Louis, Missouri: Mosby

Williams, P. (2018). *deWit's fundamental concepts and skills for nursing* (5th ed). St. Louis, Missouri: Saunders/Elsevier, Inc.

Assignments:

All reading and homework assignments must be completed prior to class unless otherwise specified.

Test-Taking Policy:

All students are expected to be available and ready to take tests at the assigned time. Students who are late for testing will have the option of taking the test during the remaining time designated for the test. If the student fails to take the test during the assigned time, the student will have 10 points deducted from their test score. If absent, tests must be taken on the student's first day returning to the school and an additional 10 points will be deducted from their test score for each day the test is not taken. It is the responsibility of the student to arrange a make-up time with the instructor. This may include returning to the school after a clinical day to take the test.

Late Homework/Assignments:

Homework and assignments are an integral part of the curriculum, and it is the responsibility of the student to submit them to the instructor when they are assigned. Students who do not submit the homework/assignments at the beginning of the class or clinical on the day the assignment is due, will receive a grade of zero (0) for that homework or assignment.

Evaluation of Student Performance:

Students are required to complete all course work, tests, and assignments by the assigned due dates. The student must achieve a cumulative grade of 75% or above to successfully pass this course:

Tests (includes ATI Exam A)	40%
Homework	5%
Discussion Questions	10%
ATI Exam B	<u>45%</u>
Total PN 2402 Practical Nurse Seminar Grade:	<u>100%</u>

Course Outline

Below is a brief summary of the daily course outline, indicating lesson content, homework assignments and testing. Due dates and more detailed information are located within your Canvas course and, within the daily announcements posted by your instructor.

DAY 1:

- Introduction to and overview of the course
- Preparing for the NCLEX Examination and Licensure
- Review of the Syllabus
- Ensure access to HESI/Saunders Online Review for the NCLEX-PN Examination, 2e
 - Complete:
 - Course orientation
 - Test-Taking Strategies including video (nonacademic strategies for test-taking)
 - The Test Plan
- Coordinated Care
- Complete assigned HESI chapter
 - Module 5 – Management of Care (Lesson 21-27)

Homework: Module 5 Exam

DAY 2: - ATI TEST A & FOCUSED REVIEW

DAY 3: - TEST 1 (Coordinated Care)

- Safety and Infection Control
- Complete assigned HESI chapter
 - Module 6 – Safety and Infection Control (Lesson 28-31)

Read and Review: Individualized Performance Profile ATI A for Coordinated Care Safety and Infection Control

Homework: Module 6 Exam

DAY 4: - TEST 2 (Safety and Infection Control)

- Health Promotion and Maintenance
- Complete assigned HESI chapter
 - Module 1: Developmental Stages and Transitions (Lesson 1-7)
 - Module 2: Health Promotion and Disease Prevention (Lesson 8-10)

Read and Review: Individualized Performance Profile ATI A for Health Promotion and Maintenance

Homework: Module 2 Exam

DAY 5: TEST 3 (Health Promotion and Maintenance)

- Psychosocial Integrity
- Complete assigned HESI chapter
 - Module 3: Mental Health Concepts (Lesson 11-16)
 - Module 4: Psychosocial Alterations (Lesson 17-20)

Read and Review: Individualized Performance Profile ATI A for Psychosocial Integrity

Homework: Module 4 Exam

DAY 6: TEST 4 (Psychosocial Integrity)

- Basic Care and Comfort
- Complete assigned HESI chapter
 - Module 7: Basic Care and Comfort (Lesson 32-34)
- Reduction of Risk Potential
- Complete assigned HESI chapter
 - Module 9: Monitoring for Health Problems (Lesson 40-44)

Read and Review: Individualized Performance Profile ATI A for Basic Care and Comfort and Reduction of Risk Potential

Homework: Module Exam 7 and Module Exam 9

DAY 7: TEST 5 (Basic Care and Comfort and Reduction of Risk Potential)

- Pharmacological Therapies
- Complete assigned HESI chapter
 - Module 8: Pharmacology and Intravenous Therapies (Lesson 35-39)

Read and Review: Individualized Performance Profile ATI A for Pharmacology Therapies

Homework: Module Exam 8

DAY 8: TEST 6 (Pharmacology and Intravenous Therapies)

- Physiological Adaptation
- Complete assigned HESI chapter
 - Module 10: Physiological Health Problems (Lesson 45-50)

Read and Review: Individualized Performance Profile ATI A for Physiological Adaptation

Homework: Module Exam 10

DAY 9 and 10 LIVE HESI REVIEW

DAY 11 ATI TEST B AND FOCUSED REVIEW

FYI

NCSBN
05/23/19

Smith, Helen

From: NCLEX Program Codes <NCLEXprogramcodes@ncsbn.org>
Sent: Thursday, May 23, 2019 11:19 AM
To: Smith, Helen
Cc: 'Linda Dahlin'
Subject: RE: Request info [not secure]

Good morning Helen,

The NCSBN creates educational program codes at the request of the nursing regulatory body. The program codes are used for NCLEX candidate registration and to track performance on the NCLEX for each program. The codes are helpful to the nursing regulatory body in tracking NCLEX pass rates for graduates of each institution.

Therefore, it is up to the nursing regulatory body to decide which program codes are needed.

I hope this information is helpful. Please see our Program Codes web page for additional information:
<https://www.ncsbn.org/1210.htm>

Kind regards,

Julie Burgett | Test Development Associate, Examinations on behalf of NCLEXprogramcodes@ncsbn.org
National Council of State Boards of Nursing (NCSBN) | 111 E. Wacker Drive, Suite 2900, Chicago, IL 60601-4277
312.525.3600 (P) | 312.279.1036 (F) | www.ncsbn.org

NCSBN

Leading nursing regulation

From: Smith, Helen <Helen.Smith@ct.gov>
Sent: Thursday, May 23, 2019 8:08 AM
To: NCLEX Program Codes <NCLEXprogramcodes@ncsbn.org>
Cc: 'Linda Dahlin' <ldahlin@stone.edu>
Subject: Request info [not secure]

EXTERNAL: This email originated from outside of the organization. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Good Morning NCSBN Program code Staff:

One of the Connecticut schools, Stone Academy, that offers a Practical Nursing Program at 3 campus locations and has both day and evening classes has asked a question and I need information from NCSBN. The school wanted to know the reason that the day and evening programs (at each campus) have unique NCSBN program codes. If you could provide me and Stone Academy with any information that would be appreciated. Please note I have cc the Provost for Stone Academy, Linda Dahlin, on this e-mail.

If you would like to discuss this request please feel free to contact me at 860-509-8106 (my direct line).

Thanks,
Helen

Helen M. Smith, R.N., M.S.N.
Nurse Consultant
Practitioner Licensing & Investigations Section
Healthcare Quality & Safety Branch
Department of Public Health
State of Connecticut
Telephone: 860-509-7552
Fax: 860-509-7535 or 860-707-1916
helen.smith@ct.gov

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FYI

The **Board of Examiners for Nursing** held a meeting on June 19, 2019 in the Legislative Office Building, 300 Capitol Avenue, Hartford, Connecticut in room 2-A.

BOARD MEMBERS PRESENT: Jason Blando, Public Member
Mary M. Brown, RN
Elizaida Delgado, LPN
Mary Dietmann, RN
Geraldine Marrocco, RN
Gina M. Reiners, RN

BOARD MEMBERS ABSENT: Patricia C. Bouffard, RN
Lisa S. Freeman, Public Member
Jennifer Long, APRN

ALSO PRESENT: Alfreda Gaither, Legal Counsel to the Board, DPH
Kathleen Boulware, Public Health Services Manager, DPH
Helen Smith Nurse Consultant, DPH
Brittany Allen, Staff Attorney, DPH
Joelle Newton, Staff Attorney, DPH
Leslie Scoville, Staff Attorney, DPH
Diane Wilan, Staff Attorney, DPH
Matthew Antonetti, Principal Attorney, DPH
Jeffrey A. Kardys, Administrative Hearings Specialist, DPH
Gail Gregoriades, Court Reporter

Mary Brown, Chair pro tempore, called the meeting to order at 8:35 a.m.

STUDENTS

Students from Lincoln Technical Institute, Stone Academy and Tunxis Community College were welcomed.

OPEN FORUM

Nothing to report

NATIONAL COUNCIL STATE BOARDS OF NURSING

Nothing to report

MINUTES

Gina Reiners made a motion, seconded by Elizaida Delgado, to approve the minutes, from the May 15, 2019 meeting. The motion passed unanimously

SCHOOL ISSUES

Porter & Chester Institute

- Nursing Education Supervisor – Hamden Campus

Dr. Maria Sparmer, Director of the Practical Nursing Program was present on behalf of Porter & Chester Institute along with Attorney Joan Feldman

The Board reviewed a request to allow Dr. Sparmer to have oversight of the Nursing Education Program at the Hamden campus until a qualified supervisor is hired.

Geraldine Marrocco made a motion, seconded by Mary Dietmann, to grant the request. The motion passed unanimously.

- NCLEX Scores – Plan of Correction

Helen Smith, Nurse Consultant, DPH provided a synopsis of Porter & Chester's plan of correction regarding NCLEX scores for the Rocky Hill - Day Program and the Stratford - Evening Program. Geraldine Marrocco made a motion, seconded by Mary Dietmann, that the plan of correction be approved and that a progress report be submitted to the Board in six months. The motion passed unanimously.

Mary Dietmann made a motion, seconded by Geraldine Marrocco, that Porter & Chester's Stratford-- Evening Program and the Rocky Hill – Day Program be placed on conditional status. The motion passed unanimously. A request by Attorney Feldman to reconsider this decision was denied.

- Investigation of Complaint by former student

Attorney Feldman reported that efforts to reach out to the former student have been unanswered. Helen Smith, Nurse Consultant, DPH reported that additional information the Board requested the former student provide to the Department of Public Health has not been received.

Stone Academy

- Approval of Interim Program Director

Linda Dahlin and Terry Kinsley were present from Stone Academy. Mary Dietmann made a motion, seconded by Geraldine Marrocco, to approve Terry Kinsley as the Interim Director of the Practical Nursing Program.

- NCLEX Scores – Plan of Correction

Helen Smith, Nurse Consultant, DPH provided a synopsis of Stone Academy's plan of correction regarding NCLEX scores for the West Haven - Day Program.

Mary Dietmann made a motion, seconded by Gina Reiners, that the plan of correction be approved. The motion passed unanimously.

Mary Dietmann made a motion, seconded by Gina Reiners, that Stone Academy's West Haven - Day Program be placed on conditional status. The motion passed unanimously.

- Request for change of NCLEX Program Code

 The Board discussed Stone Academy's request for one program code for all Stone Academy sites. The Board commented that codes for each site is a useful tool for evaluating nursing programs that have multiple locations.

Kathleen Boulware, Public Health Services Manager, DPH commented that the DPH will review this issue concerning all Connecticut nursing programs and will report back to the Board.

University of Connecticut School of Nursing– Faculty review

At its meeting on May 15, 2019, the Board requested that UCONN provide to the Department of Public Health for review, a list of nursing school faculty, and their credentials.

UCONN provided the credentials for the 36 faculty who currently teach in the pre-licensure program.

The Board requested that the DPH conduct an audit of faculty credentials for all pre-licensure programs in Connecticut.

SCOPE OF PRACTICE

Helen Smith, Nurse Consultant, DPH provided a summary of nursing scope of practice inquiries received by the Department of Public Health during May 2019.

CRITERIA FOR REINSTATEMENT OF LAPSED LICENSES

Helen Smith, Nurse Consultant, DPH reported that Charter Oak College is not interested in allowing licensed practical nurses in need of a refresher to participate in the LPN to RN Bridge Program and is not interested in starting an LPN refresher program.

June 4, 2020

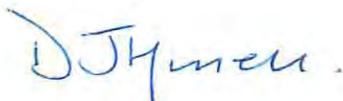
Dept. of Public Health,
410 Capitol Avenue,
PO Box 340308, MS#12HSR
Hartford, CT 06134-0308

Dear Ms. Bouffard and Board members.

Please find attached request for reconsideration of the motion passed on May 20, 2020 by the Board, denying our application to offer Virtual Clinical Simulation to our senior Practical Nursing students.

We have provided additional information regarding the number of students this decision impacts, and have demonstrated the actual number of hours that they have remaining to reach the state minimum and, the number of actual scheduled hours remaining for them to complete their educational program.

Sincerely,



Debra Hessell MSN Ed
Acting Director of Nursing

dhessell@porterchester.com

Resubmission of Request for Consideration for Porter and Chester Institute to offer Virtual Clinical Simulation

Background for application

Porter and Chester Institute currently has 44 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 situation. 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 said facilities to include student nurses and as such, students were asked not to return to their clinical sites. This was discussed at the BOEN meetings on March 18, 2020 and again on April 15, 2020.

Further to the meeting on April 15, 2020, the DPH issued a statement as a follow-up to their prior statement in March, indicating that healthcare facilities and nursing schools have interpreted this order as applying to student nurses obtaining clinical hours as part of their course of study however, at that time, the number of COVID-19 cases had risen significantly within these facilities and PPE was in very short supply.

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.

On June 1st, one facility agreed to accept groups of 4 students and 1 faculty member to recommence clinical during the day. They are at least 2 weeks away from deciding as to whether to accept evening students. Our students and faculty are currently attending the site following an update in Infection Control training.

At the time of writing, the Governor had issued a further Executive Order, No. 7UU, relating to "PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC AND RESPONSE – STAFF TESTING FOR NURSING HOMES AND ASSISTED LIVING; DEFINITION OF SUITABLE WORK." Part 1D, defines staff as:

Definition of Staff. For the purposes of this order, staff shall be defined as all personnel working in a private or municipal nursing home facility, managed residential community or assisted living services agency, including, but not limited to, administrators, medical staff, employees, per diem staff, contractors with a regular presence in the facility, private duty patient or resident contracted individuals, dietary, laundry and housekeeping personnel, and volunteers.

The clinical facility currently accepting students, expressed their uncertainty as to how they should interpret this latest guidance therefore, Porter and Chester have reached out to the department for clarity as to whether this will apply to nursing and medical students as this may further impact access to clinical sites. This was confirmed by Ms. Dalton that students would be required to be tested weekly. At the time of writing, June 4, 2020, Debra Hessel has reached out to the site to formulate a testing plan in preparation for weekly testing.

We absolutely appreciate the Board's stance on 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 and that of May 20, 2020.

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 84 hours remaining, to complete the requirement of their program; this equates to between 4 and 19% of their total clinical hours. The number of students impacted and their hours are detailed below.

As stated at the Board meeting on May 20, 2020, the letter of clarification from the DPH came too late to help these students who are now in limbo. Had the letter been issued immediately after the meeting in March, when the clinical issue was raised before the Board, in terms of the impact on student education, facilities would have understood that students were not to be excluded and these students would have had a chance to complete their educational program. This was not a criticism of the Department, merely a statement of impact.

Graduates in waiting

There are a total of 44 students currently waiting to complete their clinical hours from the April graduating class. The list below outlines the number of affected students by campus, and the number of hours they are required to complete their state minimum hours, and the remaining number of hours of clinical to complete their program.

Hamden Day Class	Hours Completed	Hours to 750 minimum	Actual remaining scheduled clinical hours
1	734.37	15.23	60
2	696.27	53.33	60
3	721.03	28.57	60
4	718.53	31.07	60
5	723.35	26.25	60
6	728.15	21.45	60
7	714.22	35.38	60
8	721.08	28.52	60
9	719.10	30.50	60
10	704.27	45.33	60
11	727.00	23.00	60
Evening Class			
1	769.36	0	27
2	751.25	0	27
3	746	4	27
4	746.08	3.32	27

Four students from this campus have resumed their clinical experience. This began on June 1st.

	Hours Completed	Hours to 750 minimum	Actual remaining scheduled clinical hours
Rocky Hill Day			
1	697.54	52.06	63
2	718.58	31.02	63
3	721.30	28.3	63
4	712.25	29.35	63
5	695.10	54.50	63
6	708.43	41.17	63
7	714.20	35.40	63
8	715.55	34.05	63
9	721.10	28.50	63
10	711.27	38.33	63
11	709.56	40.04	63
12	714.00	36.00	63
13	708.21	41.39	63
14	710.20	39.50	63

	Hours Completed	Hours to 750 minimum	Actual remaining scheduled clinical hours
Stratford Evenings			
1	733	17	37
2	743	7	37
3	741	9	37
4	740.05	8.5	37
5	733	17	37
6	718.35	31.25	37
7	731.45	18.15	37
8	738	12	37

	Hours Completed	Hours to 750 minimum	Actual remaining scheduled clinical hours
Waterbury days			
1	673.07	76.53	84
2	673.42	76.18	84
3	684.32	65.28	84
4	684.02	65.58	84
5	682.2	67.40	84
6	672.25	77.35	84
7	682.12	67.48	84

Proposal for consideration

It is proposed that Porter and Chester's application to offer VCE be reconsidered by the Board, and be given support by the Board in recommending to the Commissioner that they may be able to utilize Virtual Clinical Excursions (VCE) through Elsevier Evolve. This request is being made for consideration of a minimum of 48 hours and a maximum of 100 hours for VCE.

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.

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

A post-conference will be held to discuss the lessons, and 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.

Lesson Plan Outline

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 give some 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
 - 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, 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.

Student resources

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
- 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

Lesson 16—Preparation for Drug Administration	Lecture Time	Resources
<p>Objectives:</p> <ol style="list-style-type: none"> 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. <p>Patients: Harry George, Medical-Surgical Floor, Room 401 Jacqueline Catanazaro, Medical-Surgical Floor, Room 402</p> <p>Assignments:</p> <ul style="list-style-type: none"> • 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 Jacqueline 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. <p>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.</p> <p>Lecture/Pre-Conference:</p> <ul style="list-style-type: none"> • Introduce lesson/discuss objectives. • Review patients (discuss Preview slides). • Alert students to medication safety focus. • Assign lessons and exercises. <p>Lecture Notes: You may want to provide your students with the following helpful hints regarding medication safety:</p> <ul style="list-style-type: none"> • Sometimes there is more to the right route. • You may need to clarify medication orders (<i>Hint: dose</i>). • 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. 	<p>See workbook for exercise completion times</p> <p>Before class</p> <p>5-10 minutes</p>	<p>Lecture Slides (Preview)</p> <p>Lecture Slides (Preview)</p>

Lesson 16 Follow-Up

Lesson 16 Follow-Up	Lecture Time	Resources
<p>Post-conference: Assignment follow-up from previous class period:</p> <ul style="list-style-type: none"> • What problems, if any, did you have with this assignment? • What questions do you have? 	5-10 minutes	Lecture Slides (Points to Ponder)
<p>In-Class Discussion Activities/Questions:</p> <ul style="list-style-type: none"> • 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)
<p>Medication Safety Questions</p> <ul style="list-style-type: none"> • The following medications are ordered for Jacqueline 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 Jacqueline Catanazaro when administering her prednisone? • Mini-dose inhalers have specific directions. How would you instruct a patient to use one? • Jacqueline 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)
<p>Post Review</p> <ul style="list-style-type: none"> • Patient quiz 		

FYZ

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH
Commissioner



Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

ORDER

Whereas, on March 10, 2020, Governor Ned Lamont (the Governor), in response to the global pandemic of 2019 Coronavirus disease (COVID-19), declared a public health and civil preparedness emergency throughout the State of Connecticut pursuant to Sections 19a-131a and 28-9 of the Connecticut General Statutes, to remain in effect through September 9, 2020, unless sooner terminated by the Governor; and

Whereas, on March 13, 2020, the Governor, in furtherance of the authority granted by virtue of such emergency declaration, issued Executive Order No. 7A to address critical public health issues regarding COVID-19; and

Whereas, said Executive Order provides that for the duration of the public health and civil preparedness emergencies, or until such time as the Governor repeals or modifies Executive Order 7A, notwithstanding Section 19a-550(b)(12) of the Connecticut General Statutes or any other statute, regulation, local rule or ordinance or provision of law, the Commissioner of Public Health is authorized to issue any and all orders restricting entrance into nursing home facilities, residential care homes or chronic disease hospitals (the Facility or Facilities) that she deems necessary to protect the health and welfare of patients, residents and staff.

Now, therefore, pursuant to the authority vested in me by Executive Order No. 7A, and in response to the ongoing public health crisis arising out of COVID-19, especially among elderly individuals and persons with co-morbid conditions, I hereby order that, **effective immediately, all Connecticut Facilities shall impose a complete ban on all visitors to such Facilities, for a period of THIRTY (30) DAYS commencing on the date of this order unless terminated earlier by virtue of a future order, except that a Facility shall continue to provide reasonable access to:**

1. First responders, including Emergency Medical Services, law enforcement, firefighting and Emergency Management personnel;
2. Family members, domestic partners or other persons designated by a patient only when the Facility's Medical Director, a licensed physician or advanced practice registered nurse has determined such patient to be at the end stage of life with death being imminent;



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3. Any person authorized by law to oversee or investigate the provision of care and services; and
4. Service providers who are required to do maintenance or repair necessary without delay for the Facility's continued operation.

In all instances where visitors are permitted entry to a Facility as enumerated above, such visitors shall only be permitted into the Facility after Facility personnel have performed a risk screening of each such visitor for COVID-19, and with the use of appropriate Personal Protection Equipment (PPE) in accordance with CDC guidance documents, if necessary. Please refer to CDC guidance documents at https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Finfection-control.html

The risk screening to be performed shall include, but not be limited to, recent travel history, contact with a person presumed or confirmed positive for COVID-19, fever of 100 degrees or greater, sneezing, cough, sore throat, shortness of breath and recent travel by airplane. The Facility shall ban entrance to any visitor who confirms the existence of any of the utilized screening conditions or who the Facility determines meets one of such criteria.

Except as provided herein, nothing in this order shall suspend or modify the provisions of Sec. 19a-550(b)(12) providing the right to communicate privately with persons of the patient's choice, send and receive the patient's personal mail unopened and make and receive telephone calls privately, unless medically contraindicated, as documented by the patient's physician or advanced practice registered nurse in the patient's medical record.

Any Facility resident desirous and capable of leaving the Facility may do so at any time provided he or she is screened for exposure to COVID-19 upon his or her return as provided above.

The restrictions imposed herein shall be reviewed weekly and modified as circumstances warrant but shall, in no event, continue beyond September 9, 2020.

Ordered this 13th day of March, 2020


Renee D. Coleman-Mitchell, MPH
Commissioner

FYI

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Renée D. Coleman-Mitchell, MPH
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

HEALTHCARE QUALITY AND SAFETY BRANCH

BLAST FAX 2020-40

TO: Nursing Homes, Home Health and Hospice Agencies
FROM: Commissioner Renée D. Coleman-Mitchell, MPH *RCM*
CC: Deputy Commissioner Heather Aaron, MPH, LNHA
Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch
Donna Ortelle, Section Chief, Facility Licensing and Investigations Section
DATE: April 20, 2020
SUBJECT: Nursing Student Clinical Hours in Nursing Homes and other Facilities

The attached March 13th Commissioner's order established visitor restrictions for nursing homes. Some healthcare facilities and nursing schools have interpreted this order as applying to student nurses obtaining clinical hours as part of their course of study. Please be assured that the Department did not intend for these restrictions to apply to nursing students. The Department recognizes the valuable support and services that nursing students provide as part of the healthcare team while earning clinical hours. The Department hopes this clarification is helpful.



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STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Renée D. Coleman-Mitchell, MPH
Commissioner



Ned Lamont
Governor
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Lt. Governor

HEALTHCARE QUALITY AND SAFETY BRANCH

BLAST FAX 2020-44

TO: Nursing Homes, Home Health and Hospice Agencies
FROM: Commissioner Renée D. Coleman-Mitchell, MPH *rdcm*
CC: Deputy Commissioner Heather Aaron, MPH, LNHA
Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch
Donna Ortelle, Section Chief, Facility Licensing and Investigations Section
DATE: April 22, 2020
SUBJECT: Students Health Care Practitioners and Clinical Hours in Facilities

The April 20, 2020 Blast Fax 2020-40 clarified that the current nursing home visitor restrictions do not apply to nursing students.

The Department has received requests for further clarification related to students in other health care professional training programs such as nurse aides or respiratory care practitioners.

The Department did not intend for the visitor restrictions to apply to individuals who provide clinical care or related support in the nursing home or other facility. Students enrolled in health care-related education programs are often required to participate in clinical training in settings such as nursing homes. As part of this training, these students provide clinical care and support to residents in nursing homes.

Please be assured that individuals enrolled in health care related programs are not prohibited from completing clinical hours in nursing homes or other facilities during the pandemic.

We hope that this information is helpful. Thank you for the work you do, especially during this very challenging time.



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STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7UU

PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC AND RESPONSE – STAFF TESTING FOR NURSING HOMES AND ASSISTED LIVING; DEFINITION OF SUITABLE WORK

WHEREAS, on March 10, 2020, I issued a declaration of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and Connecticut; and

WHEREAS, pursuant to such declaration, I have issued forty-seven (47) executive orders to suspend or modify statutes and to take other actions necessary to protect public health and safety and to mitigate the effects of the COVID-19 pandemic; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, to reduce the spread of COVID-19, the United States Centers for Disease Control and Prevention (CDC) and the Connecticut Department of Public Health (DPH) recommend implementation of community mitigation strategies to slow transmission of COVID-19, including cancellation of gatherings of ten people or more and social distancing in smaller gatherings; and

WHEREAS, the risk of severe illness and death from COVID-19 is higher for individuals who are 60 or older and for those who have chronic health conditions; and

WHEREAS, public health experts have determined that it is possible to transmit COVID-19 even before a person shows symptoms and through aerosol transmission; and

WHEREAS, public health experts have indicated that persons infected with COVID-19 may not show symptoms, and transmission or “shedding” of the coronavirus that causes COVID-19 may be most virulent before a person shows any symptoms; and

WHEREAS, the CDC has recommended that people with mild symptoms consistent with COVID-19 be assumed to be infected with the disease; and

WHEREAS, upon a proclamation that a civil preparedness emergency exists, section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health; and

WHEREAS, healthcare workers face increased risk of exposure and infection to COVID-19, and, if infected, may transmit the disease to their patients, coworkers or family members; and

WHEREAS, congregate settings such as nursing homes and managed residential communities in Connecticut have experienced large numbers of COVID-19 cases and deaths during the pandemic; and

WHEREAS, testing staff in congregate settings has been identified as an of a comprehensive strategy to prevent transmission of COVID-19 and thereby protect residents of such settings from a resurgence of the disease; and

WHEREAS, the risk of infecting a family or household member may prevent certain employees from returning to work that is suitable, and current regulations could force them to choose employment that would increase such risks;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. Mandatory COVID-19 Testing for Staff of Private and Municipal Nursing Home Facilities, Managed Residential Communities, and Assisted Living Services Agencies. There shall be a program of mandatory testing for COVID-19 of the staff of private and municipal nursing home facilities, managed residential communities, and assisted living services agencies as detailed below:

- a. **Mandatory COVID-19 Testing of Nursing Home Facility Staff.** Section 19a-522 of the Connecticut General Statutes is hereby modified to require that a private or municipal nursing home facility beginning not later than the week starting June 14, 2020, shall weekly test all members of the nursing home facility staff for COVID-19 and shall continue such weekly testing for the duration of the public health and civil preparedness emergency.
- b. **Mandatory COVID-19 Testing of Private Managed Residential Community Staff.** Section 19a-694 of the Connecticut General Statutes is hereby modified to require that a private or municipal managed

residential community, beginning not later than the week starting June 28, 2020, shall weekly test all members of the managed residential community staff for COVID-19 and shall continue such weekly testing for the duration of the public health and civil preparedness emergency.

- c. **Mandatory COVID-19 Testing of Assisted Living Services Agency Staff.** Section 19a-699(b) of the Connecticut General Statutes is hereby modified to require that an assisted living services agency, beginning not later than the week starting June 28, 2020, shall weekly test all members of the assisted living services agency staff for COVID-19, and shall continue such weekly testing for the duration of the public health and civil preparedness emergency.
 - d. **Definition of Staff.** For the purposes of this order, staff shall be defined as all personnel working in a private or municipal nursing home facility, managed residential community or assisted living services agency, including, but not limited to, administrators, medical staff, employees, per diem staff, contractors with a regular presence in the facility, private duty patient or resident contracted individuals, dietary, laundry and housekeeping personnel, and volunteers.
 - e. **Orders for Testing.** The medical order for any such testing shall be obtained for all staff by such private or municipal nursing home facility, managed residential community or assisted living services agency from an appropriately licensed practitioner capable of issuing such orders within his or her scope of practice or permitted to do so by law, including any executive order.
2. **Determination of Suitable Work.** For any claim submitted covering May 17 through July 25, Section 31-236-5 of the Regulations of Connecticut State Agencies is modified to read, "In determining whether or not work offered is suitable for an individual, the Administrator shall consider the degree of risk to the individual's health or, due to the COVID-19 public health emergency, the health of a member of that individual's household. In determining the degree of risk, the Administrator may consider the individual's or household member's health, his or her physical capabilities, the physical and mental requirements of the job, working conditions and the existence of any medical documentation concerning the individual's limitations. Where an unreasonable risk to the individual's health or, due to COVID 19, the health of a member of that individual's household is established, the Administrator shall find the work to be unsuitable for the individual."

Unless otherwise specified herein, this order shall take effect immediately and remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified, extended or terminated.

Dated at Hartford, Connecticut, this 1st day of June, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



June 4, 2020

Dept. of Public Health,
410 Capitol Avenue,
PO Box 340308, MS#12HSR
Hartford, CT 06134-0308

Dear Ms. Bouffard and Board members.

Due to the continuing COVID-19 situation, Porter and Chester Institute will continue to offer all didactic content of its Practical Nursing Program in an online format for the foreseeable future. Our academic accreditors, ACCSC notified the campuses that this was extended through to the end of the year.

The five Porter and Chester Institute campus locations have been granted permission to open their campus whilst adhering to the CDC guidelines for social distancing, proper PPE and posting of appropriate signage in all areas. Campus labs began operating on June 1st, 2020 at a student to faculty ratio of 9:1 therefore, we are now able to complete all lab content of the program on-ground and make up any lost lab time from the prior term.

During this time of closure, it has given opportunity to re-examine our program outline. We would like to submit to the Board members for review, a proposal for a revised Practical Nursing program outline, which separates the lab component from the corresponding didactic course.

In addition, we have added a course entitled "Role Transition: From Student to Practitioner" in the final term. A detailed explanation for the course adjustment will be included in the narrative.

Please do hesitate to contact me with any questions you may have.



Debra Hessell MSN Ed
Acting Director of Nursing

dhessell@porterchester.com

Information to Support Request for Change to Program outline

In collaboration with the Practical Nursing Program Supervisors, Porter and Chester Institute has restructured the Practical Nursing program overview to optimize and enhance program content. It should be noted that this revision has not affected the total number of program hours, the number of credits or, program length. The number of didactic and clinical hours also remain unchanged.

The proposed implementation date is July or October 2020 which is contingent upon approval being granted by all approving bodies. Current enrolled students will not be affected as this is a linear program.

A term by term explanation of the changes are outlined below:

Day Program

Term I

Historically, this has been the most challenging term for new students.

- Life Science
 - Currently, this is spread over the first 2 terms. It is proposed to merge the two courses into 1 course.
 - A comprehensive section on medical terminology is being added to the life science course to enhance preparation and understanding of disease processes as student progress into their Medical-Surgical coursework.
- Fundamentals of Nursing.
 - Currently, this course includes a clinical lab skills component, is spread over the first 2 terms. It is proposed to merge the Fundamentals courses and to separate the lab component from the didactic content.
- Fundamentals of Nursing Lab (new)
 - Students will be required to pass the lab skills course prior to being permitted to attend their first clinical rotation.
 - By making this a pre-requisite for the first clinical course, it will ensure students clinical ability to perform core basic nursing skills are all assessed and evaluated in the school clinical lab prior to their clinical experience.
 - If the student fails the Fundamentals Lab Skills course, they will be required to repeat the course before permitted to attend clinical and, from moving on in their program.
- Clinical Experience I (Introduction to Clinical Practice)
 - The number of hours in the course has been reduced from 168 hours to 42, to enable more hours for foundational learning and lab skills development.
 - There was a disparity of clinical hours between term I and term II with 168 hours in term I and just 88 hours in term II.
 - It is proposed that this course is named "Introduction to Clinical Practice"

Term II

- The changes to Life Science and Fundamentals are outlined above.
- Pharmacology
 - Pharmacology has been moved from term III and added to term II. Successful completion of all term II requirements will afford the students more time within the clinical setting to grow

and improve the skills learned in the school clinical lab in regards to safe medication preparation and administration

- Previously, Pharmacology was split into 2 courses, Pharmacology I & II, with lab content being included in Pharmacology I.
- The Pharmacology lab component has been removed from the didactic component to create a stand-alone course.
 - If a student fails the lab component of the course, they will not be permitted to move on in their program.
- **Mental Health**
 - This course has been moved in to term II. There have been no changes to the number of hours assigned to this course
- **Clinical Experience IIA (Clinical Experience II)**
 - The number of hours in this course have been increased from 88 to 189.

Term III

- **Medical-Surgical Nursing**
 - Currently, this course is split into 2 courses within the same term and Med-Surg I is a pre-requisite for Med-Surg II.
 - The courses have been combined and the total hours have been reduced from 147 to 130.
- **Clinical Experience IIB (Clinical Experience III)**
 - The number of clinical hours have been increased from 122 to 189

Term IV

- **Maternal-Child**
 - There have been no changes to the numbers of hours in this course
- **Perspectives**
 - This course was previously divided over 2 courses.
 - The content in the prior version of Perspectives I was felt to more appropriately positioned later in the program as it addresses patient education and professional development content.
 - The prior Perspectives II content is appropriately paired with Maternal Child as this course discusses growth and development throughout the lifespan from birth to death; theories related to human development and principles of growth and development; concepts of wellness, illness prevention and health promotion throughout the life span and, the aging process and the needs and care of the elderly.
- **Clinical Experience III (Clinical Experience IV)**
 - The number of clinical hours have been decreased from 210 to 189

Term V

- **Role Transition: From Student to Practitioner**
 - This is an additional course that has been added to the program
 - It is designed to assist the student in their transition to workforce readiness.
 - This will reflect the leadership competence in the final clinical experience.
 - The objective of the course is to utilize Patricia Benner's Novice to Expert theory to model knowledge and skills necessary to progress safely to the role of the Licensed Practical Nurse.

- Practical Nurse Seminar
 - The number of hours in this course has increased from 77 to 90
 - The course will be built around the HESI/Saunders Online Review course which will be faculty led

Evening Program

The current evening program is offered over 7 terms, totaling 21 months. The evening section is affected by student attrition due to financial issues, loss of interest due the length of the program, child care issues, leading to small graduating cohorts. This in turn, can have a detrimental effect on the NCLEX-PN® outcome for first time test takers.

Currently, the evening outline is different to that of the day time in respect of course order and the number of clinical hours required per term, making transfer from the day to the evening program difficult for those students that may need to change shifts. The proposed outline enables any student that may fail a course to take the course in the opposite shift, to promote continuity of learning rather than having to sit out until the course is next offered.

With the request to decrease program length, the institute will have to make a change to the days that the courses are scheduled. Currently, the evening program is offered Monday-Thursday from 5:00 – 10:00. Moving to the new outline would mean that students would need to attend class Monday-Friday from 5:00 – 10:35.

The following pages are copies of the day and evening program outline and the revised program outline.

- Page 4 is the current day program outline
- Page 5 is the current evening outline
- Page 6 is the revised program outline

Current Curriculum Outline – Day Program

Prereq	Term	Course #	Course Title	Didac	Lab	Prac	TOTAL	Credits	Term
None	1		Life Science I	65			65	4.5	317
	1		Fundamentals I	47	37		84	5	
	1		Clinical Experience I			168	168	5.5	
								Term total	317
Term 1	2		Life Science II	44			44	3	319
	2		Fundamentals II	40	42			5	
	2		Nursing Perspectives I	35	7		42	2.5	
	2		Nursing Perspectives II	56	7		63	4	
	2		Clinical IIA			88	88	3	
								Term total	319
Term 1 & 2	3		Medical-Surgical Nursing I	70				4.5	309
	3		Medical-Surgical Nursing II	77				5	
	3		Pharmacology I	20	20			2.5	
	3		Clinical IIB			122	122	4	
								Term total	309
Term 1 - 3	4		Maternal-Child	77			77	5	329
			Pharmacology II	42				2.5	
	4		Clinical III				210	7	
								Term total	329
Term 1-4 courses	5		Mental Health	35			35	2	322
	5		Seminar	77			77	5	
	5		Clinical			210	210	7	
								Term total	322
				Didac	Lab	Clin	Credits		Hours
PROGRAM TOTALS				685	113	798	77		1596

Current Curriculum Outline – Evening Program

Prereq	Term	Course #	Course Title	Didac	Lab	Prac	TOTAL	Credits	Term
None	1		Life Science I	65			65	4.5	222
	1		Fundamentals I	47	37		84	5	
	1		Clinical Experience I A			73	73	2.5	
								Term total	222
Term 1	2		Life Science II	44			44	3	221
	2		Fundamentals II	40	42		82	5	
	2		Clinical Experience I B			95	95	3	
Term 1 & 2	3		Nursing Perspectives I	35	7		42	2.5	233
	3		Nursing Perspectives II	56	7		63	4	
	3		Pharmacology I	20	20		42	2.5	
	3		Clinical II A			88	88	3	
								Term total	233
Term 1-3	4		Medical-Surgical Nursing I	70				4.5	234
	4		Pharmacology II	42				2.5	
	4		Clinical II B			122	122	4	
Term 1 - 4	5		Medical-Surgical Nursing II	77			77	5	232
	5		Mental Health	35			35	2	
	5		Clinical IIIA				120	4	
Term 1-5	6		Maternal-Child	77			77	5	225
	6		Clinical IIIB			90	90	3	
	6		Clinical IVA			58	58	2	
Term 1-6	7		Seminar	77			77	5	229
	7		Clinical IVB			152	152	5	
				Didac	Lab	Clin		Credits	Hours
PROGRAM TOTALS				685	113	798		77	1596

Proposed Curriculum Outline – Day and Evening

Prereq	Term	Course Title	Didac	Lab	Prac	TOTAL	Credits	Term
None	1	Life Science	118			118	8	320
	1	Fundamentals - Theory	100			100	7	
	1	Fundamentals - Lab		60		60	3	
Funds Lab	1	Introduction to Clinical Practice			42	42	1	
							Term total	320
Term 1	2	Pharmacology - Theory	75			75	5	319
		Pharmacology - Lab		20		20	1	
	2	Mental Health	35			35	2	
	2	Clinical II			189	189	6	
							Term total	319
Term 1 & 2	3	Medical-Surgical Nursing	130			130	9	319
	3	Clinical III			189	189	6	
							Term total	319
Term 1 - 3	4	Maternal-Child	77			77	5	319
	4	Perspectives	39	14		53	3.5	
	4	Clinical IV				189	6	
							Term total	319
Term 1-4 courses	5	Role Transition; From Student to Practitioner	40			40	2.5	319
	5	Seminar	90			90	6	
	5	Clinical V			189	189	6	
							Term total	319
			Didac	Lab	Clin		Credits	Hours
PROGRAM TOTALS			704	94	798		77	1596



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Baton Rouge, Louisiana

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Southwestern College
San Diego, California

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Daytona State College
Daytona Beach, Florida

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Reading Hospital School of Health Sciences
Reading, Pennsylvania

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Dean of Allied Health and Nursing
Augusta Technical College
Augusta, Georgia

SCOTT THIGPEN, DNP, RN, MSN, CCRN
Professor of Nursing
South Georgia State College
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Bluffton, South Carolina

DELIVERED VIA EMAIL ONLY

April 20, 2020

Dawn Bunting, EdD, MSN, RN, CNE
Director of Nursing
Capital Community College
950 Main Street
Hartford, CT 06103

Dear Dr. Bunting:

This letter is formal notification of the action taken by the Accreditation Commission for Education in Nursing (ACEN) at its meeting in March 2020. The Board of Commissioners granted continuing accreditation to the associate nursing program and scheduled the next evaluation visit for Fall 2027.

Deliberations centered on the materials available to the Board from this accreditation review process and the recommendation for accreditation proposed by the peer evaluators on the site visit team and the Evaluation Review Panel.

The Board identified the following:

Areas of Strength

Standard 5 Resources, Criteria 5.2 and 5.3

- The program has access to plentiful physical resources.
- On-campus and off-campus learning and technology resources are plentiful and high quality, allowing the program to optimize end-of-program student learning outcomes.

Areas Needing Development

Standard 6 Outcomes, Criterion 6.3

- Continue to identify and implement strategies to improve the program completion rate when the expected level of achievement is not met.

Congratulations on this outstanding achievement! We look forward to continued successes for your nursing program. On behalf of the Board of Commissioners, we thank you and your colleagues for your commitment to quality nursing education. In addition to this official letter, your nursing program will receive an ACEN certificate authenticating the Board of Commissioners' decision. The processing of these certificates has been delayed due to the COVID-19 outbreak and will resume when ACEN staff members are able to return to the office. If you have questions about this action or about ACEN policies and procedures, please contact me.

Sincerely,

Marsal P. Stoll, EdD, MSN
Chief Executive Officer



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President
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JOHN H. RUSSELL, PhD
St. Augustine, Florida

SUSAN ZLOTLOW, PhD
Consultant
QuantAid, LLC
Bluffton, South Carolina

DELIVERED VIA EMAIL ONLY

April 20, 2020

Rosemarie Baker, DHEd, MSN, MBA, RN, NE-BC
Chair, Department of Nursing
St. Vincent's College at Sacred Heart University
75 Hunting Street
Bridgeport, CT 06606

Dear Dr. Baker:

This letter is formal notification of the action taken by the Accreditation Commission for Education in Nursing (ACEN) at its meeting in March 2020. For the continuing accreditation site visit, the Board of Commissioners granted continuing accreditation to the associate nursing program; additionally, for the focused visit, the Board affirmed continuing accreditation, as the program is in compliance with all Accreditation Standards and Criteria reviewed during the focused visit following a change in ownership, and scheduled the next evaluation visit for Fall 2027.

Deliberations centered on the materials available to the Board from this accreditation review process and the recommendation for accreditation proposed by the peer evaluators on the site visit team and the Evaluation Review Panel.

The Board identified the following:

Areas of Strength

Standard 3 Students, Criterion 3.6

- The college's default rate has been below 5% for the last three years.

Areas Needing Development

Standard 1 Mission and Administrative Capacity, Criterion 1.2

- Ensure opportunities exist for the representation of students in governance activities of the nursing education unit and the governing organization.

Standard 4 Curriculum, Criterion 4.3

- Ensure the curriculum is regularly reviewed to ensure integrity, rigor, and currency.

Standard 6 Outcomes, Criteria 6.1, 6.2, 6.3, and 6.4

- Ensure the program demonstrates that there are appropriate assessment methods that result in meaningful data for each end-of-program student learning outcome.
- Ensure the program demonstrates evidence that assessment data are consistently analyzed and used in program decision-making for the maintenance and improvement of students' attainment of the end-of-program student learning outcomes.

Areas Needing Development (continued)**Standard 6 Outcomes, Criteria 6.1, 6.2, 6.3, and 6.4**

- Review and revise the expected level of achievement for the licensure examination pass rate to be congruent with the ACEN Criterion (for the accelerated program option).
- Develop and implement strategies/actions to improve the licensure examination pass rate when the expected level of achievement is not met (for the accelerated program option).
- Ensure there are specific, measurable expected level(s) of achievement for program completion that are determined by the faculty and reflecting student demographics.
- Ensure the program demonstrates evidence of a minimum of the three most recent years of available program completion data disaggregated by program option.
- Continue to identify and implement strategies/actions to improve program completion rate when the expected level of achievement is not met.
- Review and revise the expected level of achievement for job placement to be congruent with the ACEN definition of job placement.
- Ensure that job placement data are sufficient to inform program decision-making.
- Ensure the program demonstrates evidence of a minimum of the three most recent years of available job placement data and the data are aggregated for the program as a whole.

Congratulations on this outstanding achievement! We look forward to continued successes for your nursing program. On behalf of the Board of Commissioners, we thank you and your colleagues for your commitment to quality nursing education. In addition to this official letter, your nursing program will receive an ACEN certificate authenticating the Board of Commissioners' decision. The processing of these certificates has been delayed due to the COVID-19 outbreak and will resume when ACEN staff members are able to return to the office. If you have questions about this action or about ACEN policies and procedures, please contact me.

Sincerely,



Marsal P. Stoll, EdD, MSN
Chief Executive Officer



655 K STREET NW
SUITE 750
WASHINGTON DC 20001

202-887-6791

CCNEACCREDITATION.ORG

June 4, 2020

Mary Alice Donius, EdD, RN
Dean
College of Nursing
Sacred Heart University
5151 Park Avenue
Fairfield, CT 06825-1000

Dear Dr. Donius:

On behalf of the Commission on Collegiate Nursing Education (CCNE), I am pleased to advise you that the CCNE Board of Commissioners acted at its meeting on May 5-8, 2020, to grant accreditation to the **baccalaureate degree program in nursing** at Sacred Heart University for 10 years, extending to June 30, 2030. The accreditation action is effective as of September 25, 2019, which is the first day of the program's recent CCNE on-site evaluation. You should plan for the next on-site evaluation to take place in the fall of 2029.

At its meeting, the Board determined that the program met all four accreditation standards. The Board additionally determined that there are no compliance concerns with respect to the key elements.

As is required for all accredited programs, a continuous improvement progress report (CIPR) must be submitted at the mid-point of the accreditation term. Please note that the CIPR needs to demonstrate the program's compliance with the CCNE standards and key elements that are in effect at the time of its submission. As a courtesy, CCNE will send a reminder letter to the chief nurse administrator informing the program of the specific standards to be addressed and providing guidance for the preparation of the report. The deadline for submitting the CIPR to CCNE is June 1, 2025. The Report Review Committee, and then the Board of Commissioners, will review the CIPR. For more information about CIPRs and the report review process, please refer to the CCNE procedures.

As you know, the team report and the program's response to the team report are available to the institution in the CCNE Online Community. We hope that the results of the self-study process and the team report will be useful to the continued growth and development of the nursing program. Due to limited access to the CCNE office as a result of the COVID-19 pandemic, the certificate of accreditation will be mailed to you when operations permit staff to do so.

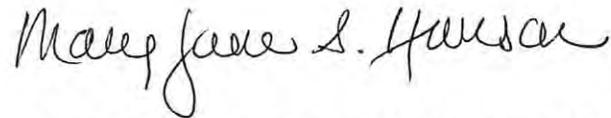
In accordance with CCNE policy, if a program or institution elects to make a public disclosure of a program's accreditation status with CCNE, the program or institution must disclose that status accurately. The program or institution disclosing the information must identify the nursing program and its affiliation with CCNE. Please refer to CCNE's disclosure policy and the statements CCNE has approved for use, as well as information on use of the CCNE accreditation seal, at <http://www.aacnnursing.org/CCNE/Seal-Policy/Baccalaureate-Graduate>. Please ensure that the institution's website and other materials are updated to reflect this language, as appropriate.

As a reminder, programs are expected to comply with the CCNE standards and procedures throughout the period of accreditation. These documents are available at <https://www.aacnnursing.org/CCNE-Accreditation/Accreditation-Resources/Standards-Procedures-Guidelines>. Information on advising CCNE in the event of a substantive

change affecting the nursing program is available at <https://www.aacnnursing.org/CCNE-Accreditation/What-We-Do/Bacc-Graduate-Change-Notifications>. Substantive change notifications must be submitted to CCNE no earlier than 90 days prior to implementation or occurrence of the change, but no later than 90 days after implementation or occurrence of the change. These reporting requirements are described further in the CCNE procedures.

Thank you for your participation in the CCNE accreditation process. The Commissioners join me in expressing our very best wishes as you continue to promote excellence in nursing education.

Sincerely,

A handwritten signature in black ink that reads "Mary Jane S. Hanson". The signature is written in a cursive, flowing style.

Mary Jane S. Hanson, PhD, CRNP, CNS, FNP-BC, ACNS-BC, FAANP
Chair, Board of Commissioners

cc: President John J. Petillo
CCNE Board of Commissioners
CCNE Accreditation Review Committee
CCNE Evaluation Team

**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. The Notice informed Respondent that a hearing was scheduled for October 16, 2019. Bd. Ex. 2. Subsequently, the October 16, 2019 hearing was rescheduled to December 18, 2019. A Notice informing Respondent that the hearing had been rescheduled to December 18, 2019 was sent by certified and first-class mail to Respondent's address of record on file with the Department, 20873 Hartford Way, Lakeville, MN, 55044.¹ Bd. Ex. 4. 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." Bd. Ex. 4. 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.

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

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.

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, 3, and 4.
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.”) Ex.) 1.

In this case, a preponderance of the evidence establishes that the Respondent is a resident 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 specifically 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 Notice of Conference. (Tr., pp.4, 5; Dept. Ex, 1, pp. 5-9); and, 5)

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) of the Statutes.

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

**STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING**

Joseph Iannicelli, L.P.N.
License No. 032178

Petition No. 2019-701

MEMORANDUM OF DECISION

I

Procedural Background

On August 9, 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. The Charges allege Joseph Iannicelli's ("Respondent") violations of Chapter 378 of the Connecticut General Statutes ("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)(5).

On August 9, 2019, the Department filed a Motion for Summary Suspension Order ("Summary Suspension Order") with the Board. Bd. Ex. 1. 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. 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. Bd. Ex. 2.

On August 14, 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 at 287 Hill Street, Waterbury, CT 06704 and by email to Respondent's email address (iannicelli99@gmail.com). Bd. Ex. 4. On the same date, the Department mailed the Charges, Notice, and Summary Suspension Order to a State Marshal for service to Respondent at his address of record. *Id.* On August 18, 2019, the State Marshal served Respondent at his usual place of abode at 287 Hill Street, Waterbury, CT 06704. Bd. Ex. 5. The Notice stated that a hearing was scheduled for September 18, 2019. Bd. Ex. 4.

On September 16, 2019, Respondent emailed the Board, requesting a continuance of the September 18, 2019 hearing. Without objection from the Department, the continuance was granted, and the hearing was rescheduled to November 20, 2019. Bd. Ex. 6.

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

At the beginning of the hearing, Attorney Newton orally moved to deem the allegations admitted because Respondent had not filed an Answer to the Charges. Tr. 11/20/19, p. 5. Attorney Newton’s motion was denied. *Id.* Subsequently, Respondent answered the Charges orally on the record. Respondent admitted to all of the Charges. Tr. 11/20/19, pp. 6-7. Respondent also stated on the record that his address is 136 Lannen Street, Waterbury, CT 06704. Tr. 11/20/19, p. 6.

The Board concluded that it could not determine whether Respondent was in compliance with his probation without the necessary documentation required to verify compliance. Therefore, the Board left the record open and continued the hearing to December 18, 2019 (Tr. 11/20/19, p. 33), to afford Respondent sufficient time to obtain specific the records and documentation requested by the Board. Bd. Ex. 7. The Board clearly stated on the record that Respondent was responsible for ensuring that the Veterans Administration (“VA”) staff submitted Respondent’s urine screen reports that complied with the Department’s probation requirements to the Department prior to the December 18, 2019 hearing. In addition, the Board clearly specified that Respondent was responsible for submitting his therapy and employer reports and his support group meeting logs prior to the December 18, 2019 hearing. Tr. 11/20/19, pp. 31-33.

On December 18, 2019, the Board convened the second day of the hearing. Respondent was present at the hearing and was not represented by counsel. Tr. 12/18/19, p. 2. Attorney Newton represented the Department. *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

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Waterbury, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 032178.
2. In paragraph 2 of the Charges, the Department alleges that on March 6, 2019, the Board ordered a Memorandum of Decision in Petition No. 2017-26 (“March 6, 2019 Order”) after finding that Respondent abused and/or utilized opiates, heroin and/or cocaine to excess. The March 6, 2019 Order placed Respondent’s license on probation for four years and required him, in part, to submit therapy, support group, controlled substance prescriptions, employer and random urine screen reports.
3. In paragraph 3 of the Charges, the Department alleges that from approximately March 6, 2019 to date, Respondent has failed to provide therapy, support group, controlled substance prescriptions, urine screens and/or employer reports to the Department consistently and as required by the March 6, 2019 Order.
4. In paragraph 4 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

III

Findings of Fact

1. Respondent of Waterbury, Connecticut is and has been at all times, as referenced in the Charges, the holder of Connecticut L.P.N. license number 032178. Tr. 11/20/19, p. 6.
2. The Board issued the March 6, 2019 Order after finding that Respondent abused and/or utilized opiates, heroin and/or cocaine to excess. The March 6, 2019 Order placed Respondent’s license on probation for four years and required him, in part, to submit therapy reports, documentation of support group attendance, controlled substance prescriptions, employer reports, and random urine screen reports. Tr. 11/20/19, p. 6; Department (“Dept.”) Ex. 1, p.1.
3. On March 11, 19, and 21, 2019 and April 17, 22, 24, and 30, 2019, the Department notified Respondent by letter or email that he was not in compliance with the terms of the March 6, 2019 Order. Dept. Ex. 1, pp. 1-2 (under seal), 5-6, 3, 15, 21, 23 (under seal), 27, 29, 39, 41-43.
4. From approximately March 6, 2019 to November 19, 2019, Respondent failed to provide therapy reports, documentation of support group attendance, controlled substance

prescriptions, random urine screen reports, and/or employer reports to the Department consistently and as required by the March 6, 2019 Order. Tr. 11/20/19, p. 7; Dept. Ex. 2.

5. On April 10, 2019, the Department issued a Notice of Non-Compliance to Respondent regarding his violation of the terms of his probation. Dept. Ex. 1, pp. 2, 6, 7.
6. Respondent did not submit therapy reports for April and May 2019. Dept. Ex. 1, p. 2.
7. On June 19, 2019, the Department notified Respondent of his violation of the terms of his probation by failing to submit the required documentation to the Board in accordance with the March 6, 2019 Order. Dept. Ex. 1, p. 11.
8. On June 20, 2019, Respondent's therapist submitted an incomplete report to the Department. Dept. Ex. 1, pp. 2, 9.

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 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: . . . (5) abuse or excessive use of drugs, including alcohol, narcotics or chemicals; . . .

Respondent admitted to all of the allegations contained in the Charges. Thus, the Board finds that with respect to the allegations contained in the Charges, the Department sustained its burden of proof by a preponderance of the evidence. Findings of Fact ("FF") 1-8.

With respect to the allegations contained in paragraphs 2 and 3 of the Charges, the Department sustained its burden of proof through the Department's investigative record, Respondent's medical records, and his admissions under oath.

The Board issued the March 6, 2019 Order after finding that Respondent abused and/or utilized opiates, heroin and/or cocaine to excess. The March 6, 2019 Order placed Respondent's license on probation for four years and required him, in part, to submit therapy reports, documentation of support group attendance, controlled substance prescriptions, employer reports, and random urine screen reports. FF 2.

The record establishes that on March 11, 19, and 21, 2019, and April 17, 22, 24, and 30, 2019, the Department notified Respondent by letter or email that he was not in compliance with the terms of the March 6, 2019 Order. FF 3. The record also establishes that from on or about March 6, 2019 to November 19, 2019, Respondent did not comply with the terms of his probation by failing to consistently provide therapy reports, documentation of support group attendance, controlled substance prescriptions, urine screen reports, and/or employer reports to the Department as required by the March 6, 2019 Order. FF 4. On April 10, 2019, following at least seven attempts to obtain Respondent's therapy, urine screen, and employer reports, as well as documentation of Respondent's support group attendance and controlled substance prescriptions, the Department issued a Notice of Non-Compliance to Respondent regarding his violation of the terms of his probation. FF 5. Respondent did not submit therapy reports for April and May 2019. FF 6. Subsequently, on June 19, 2019, the Department notified Respondent of his failure to submit the required documentation in accordance with the March 6, 2019 Order. FF 7. On June 20, 2019, following numerous attempts by the Department to obtain Respondent's therapy reports, Respondent's therapist submitted an incomplete report to the Department. FF 8.

At the November 20, 2019 hearing, the Department presented an opening statement to the Board, outlining the Respondent's failure to submit documentation verifying compliance with the terms of his probation as delineated in the March 6, 2019 Order. Tr. 11/20/19, pp. 10-13. In response, Respondent testified that he has been compliant with the terms of his probation. Specifically, Respondent stated, "I've been doing everything that I was asked to do." Tr. 11/20/19, p. 13. Respondent testified that he was not aware that the VA staff was not submitting his records to the Department, even after he brought this oversight to their attention. Respondent further testified that he confronted the VA staff about conducting his urine screens properly and requested that all of the testing required, pursuant to the terms of his probation, be conducted. Tr. 11/20/19, p. 15. Respondent credibly testified that he was submitting to urine screens every

week, seeing his therapist once a month, attending AA support meetings, weekly group meetings at the VA, and substance abuse meetings at the VA five times per week. Tr. p. 11/20/19, pp. 17-19.

At the December 18, 2019 hearing, Respondent submitted to the Department a packet of documentation which was comprised of employer reports, support meeting logs, and urine screen reports. These documents substantiated Respondent's recovery efforts and his compliance with the terms of his probation. Tr. 12/18/19, pp. 3-4.

Based on the foregoing, the Board finds 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 032178, as follows:

1. For the four-year probationary period which began on **March 6, 2019**, Respondent's license shall be on probation, under the following terms and conditions, as specified below. The terms and conditions of *this* Order supersede and retroactively replace in their entirety the terms and conditions of the March 6, 2019 Order previously issued concerning Respondent's L.P.N. license number 032178. If any of the conditions of probation are not met, Respondent's L.P.N. license may be subject to disciplinary action pursuant to Conn. Gen. Stat. § 19a-17.
 - A. During the period of probation, the Department shall pre-approve Respondent's employment and/or change of employment within the nursing profession.
 - 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 during the probationary period.
 - C. Respondent shall provide a copy of this Decision 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 30 days of the commencement of employment, as to receipt of a copy of this Decision.

- D. Respondent shall not administer, count, or have access to controlled substances, or have responsibility for such activities in the course of nursing duties during the first year of working as a nurse during the probationary period.
- E. If employed as a nurse, Respondent shall cause employer reports to be submitted to the Department by his immediate supervisor during the entire probationary period. Employer reports shall be submitted commencing with the report due on the first business day of the month following employment as a nurse. Employer reports shall be submitted at least monthly for the first year of working as a nurse, the second and fourth years of the probationary period, and, at least quarterly for the third year of the probationary period, which began on March 6, 2019.
- F. The employer reports cited in Paragraph E above shall include documentation of Respondent's ability to practice nursing safely and competently. Employer reports shall be submitted directly to the Department at the address cited in Paragraph Q below.
- G. Should Respondent's employment as a nurse be involuntarily terminated or suspended, Respondent and his employer shall notify the Department within 72 hours of such termination or suspension.
- H. 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 Q below.
- I. During the entire probationary period, at his expense, Respondent shall engage in therapy and counseling for chemical dependency with a licensed or certified therapist and/or psychiatrist, approved by the Department. Additionally, Respondent shall participate in NA substance abuse support groups at least four times a month for the entire probationary period and shall submit written

documentation of his participation and/or attendance in said program to the Department.

- J. Respondent shall provide a copy of this Decision to his clinical therapist and to his psychiatrist. Respondent's therapist and psychiatrist shall notify the Department in writing, within 30 days of the effective date of this Decision, regarding their receipt of a copy of this Decision.
- K. Respondent shall cause evaluation reports to be submitted to the Department by his therapist and psychiatrist during the entire probationary period. Therapy reports shall be submitted at least monthly for the first year working as a nurse, the second and fourth years of the probationary period, and at least quarterly for the third year of the probationary period, which began on March 6, 2019.
- L. The therapy reports cited in Paragraph K above shall include documentation of dates of treatment and an evaluation of Respondent's progress, including alcohol and drug free status and ability to practice nursing safely and competently. Therapy reports shall be submitted directly to the Department at the address cited in Paragraph Q below.
- M. Observed random urine screens
 - (1) At his 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, his therapist, the Department, and his prescribing practitioner of any drug(s) he is taking. For any prescription of a controlled substance(s) prescribed 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) Respondent must submit to at least one such observed, random alcohol/drug screen on a weekly basis during the first year working as a nurse, the second and fourth years of the probationary period, and at least twice a month during the third year of 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 Q below by Respondent's therapist, personal physician, or the testing laboratory.

N. Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed 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.

- O. 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, or over the counter cough suppressants and/or 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, or over the counter cough suppressants and/or cold/flu remedies shall not constitute a defense to such positive screen.
- P. The Department must be informed in writing prior to any change of address.
- Q. 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 his 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, Joseph Iannicelli, and the Department of this decision.

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

BOARD OF EXAMINERS FOR NURSING

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

MEMORANDUM

TO: Connecticut Board of Examiners for Nursing

FROM: Dana Dalton, RN
Supervising Nurse Consultant

Date: June 9, 2020

RE: Arline B. Annunziato

Profession: RN

Petition Number: 2020-378

REINSTATEMENT REQUEST

1. The respondent was first licensed as a RN in CT on 7/17/06 and has held licenses in Arizona and Connecticut; neither are active. Her Arizona nursing license is expired and in September 2016, she agreed not to renew her Connecticut nursing license after allegations were made against her.
2. In 2016, a patient alleged that she gave Respondent Dilaudid tablets on several occasions because Respondent asked her for them. This patient complaint prompted a medication audit which revealed a loss of eight (8) tablets of Dilaudid and nine (9) tablets of Xanax. Respondent was not cooperative with the Drug Control investigation and did not ever complete a urine drug test, as requested by her employer. She initially worked with HAVEN but could not maintain compliance. A psychiatric evaluation was completed and she was referred to the Department and subsequently, agreed not to renew her license.
3. Respondent is requesting reinstatement of her nursing license. She denies ever stealing patient medication and states she never had a substance abuse problem. Respondent explained she was under significant stress at the time and was unable to set boundaries with her patient that was experiencing hallucinations, resulting in a blurred nurse/patient relationship. Respondent left the nursing field in 2016.
4. Respondent has provided documentation to the department that confirms her involvement in therapy since 2016 and the stable status of her mental health. Respondent was never diagnosed with a substance use disorder in treatment. Respondent is compliant with her treatment services. Professional reference letters have also been submitted on Respondent's behalf.

The Department is recommending a Reinstatement Consent Order with the following terms:

- 4 years of probation to include the following:
 - o 1-year restriction for narcotic keys
 - o Urine screens: once per week for the 1st and 4th years, then twice monthly for the 2nd and 3rd years
 - o Therapy and employer reports monthly for the 1st and 4th years, then quarterly for the 2nd and 3rd years
 - o AA/NA meetings 8-10 per month
 - o No solo practice or home care
 - o Refresher Course
 - o Coursework in professional boundaries and ethics

The Department is seeking the Board's advice regarding any additional requirements that Ms. Annunziato should undergo before having her license reinstated.

SUMMARY SUSPENSION COVER SHEET

In Re: William Meister, RN

Petition No. 2020-542

1. William Meister of North Haven, Connecticut (hereinafter “respondent”) graduated from St. Philips College and was licensed to practice nursing in 2011.
2. On March 18, 2020, the Board issued a Consent Order in Petition No. 2018-733 based on respondent’s diversion of Hydromorphone, and Propofol. The Consent Order placed respondent’s license on probation for (4) years and required, in part, random urine drug testing.
3. On or about May 20, 2020 failed to submit to a random urine screen while the Consent Order remained in full force and effect.
4. For the foregoing reasons, the Department believes that respondent’s practice of nursing 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 contain confidential information protected by federal and state law. 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: William Meister, RN

Petition No. 2020-542

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 William Meister's nursing license in Connecticut. This motion is based on the attached Statement of Charges, affidavit and on the Department's information and belief that the William Meister's practice of nursing represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 15th day of June 2020.



Christian D. Andresen, 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: William Meister, RN

Petition No. 2020-542

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 William Meister:

1. William Meister of North Haven, Connecticut ("respondent") is the holder of Connecticut registered nursing license 102986.
2. On March 18, 2020, the Board issued a Consent Order in Petition No. 2018-733 based on respondent's diversion of Hydromorphone and Propofol. The Consent Order placed respondent's license on probation for four (4) years and required, in part, random urine drug testing.
3. On or about May 20, 2020 failed to submit to a random urine drug screen after being contacted by his screening monitor.
4. Respondent's conduct as described above constitutes a violation of the Consent Order's probationary terms and subjects his license to revocation or other disciplinary action authorized by Connecticut General Statutes §§19a-17 and 20-99(b).

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 15th day of June 2020.


Christian D. Andresen, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

SUMMARY SUSPENSION COVER SHEET

In Re: Laura Kisatsky, RN

Petition No. 2020-541

1. Laura Kisatsky of Cornwall, Connecticut (hereinafter “respondent”) graduated from St. Mary’s Hospital School of Nursing College and was licensed to practice nursing in 1994. Respondent has a long history of discipline with the Department.
2. On January 31, 2005, respondent voluntarily surrendered her nursing license after admitting to diverting controlled substances while employed at Yale New Haven Hospital.
3. On October 1, 2014, the Board of Examiners for Nursing (“the Board”) ordered a Reinstatement Consent Order in Petition No. 2014-35. The Reinstatement Consent Order required respondent to successfully pass NCLEX. It also placed respondent’s license on probation for four years and required her, in part, to (a) to submit to random urine screens all of which must be negative; and (b) prohibited her from obtaining and/or using controlled substances.
4. On May 16, 2016, the probationary period for the Reinstatement Consent Order went into effect after respondent’s successful completion of NCLEX.
5. On May 11, 2018, while the terms and conditions of the Reinstatement Order remained in full force and effect, respondent abused and/or utilized morphine (“morphine abuse.”)
6. On December 5, 2018, while the terms and conditions of the Reinstatement Order remained in full force and effect, respondent abused and/or utilized alcohol to excess (“alcohol abuse.”)
7. On January 16, 2019, the Board ordered respondent’s nursing license summarily suspended in Petition Number 2018-1416 as a result of her alcohol abuse.
8. On March 6, 2019, the Board ordered a Memorandum of Decision in Petition No. 2018-691 (“First Order”) based upon respondent’s morphine abuse. The Order placed

respondent's license on probation and required her, in part, to (a) submit to random urine screens all of which must be negative; and (b) prohibited her from obtaining and/or using controlled substances.

9. On April 14, 2020, respondent abused and/or utilized to excess fentanyl and/or norfentanyl while the terms and conditions of the First Order remained in full force and effect.
10. On April 15, 2020, the Board ordered Memorandum of Decision in Petition No. 2018-1416, ("Second Order") based upon respondent's alcohol abuse. The Order, in part, required respondent to submit to random urines.
11. On multiple days in May, 2020, respondent failed to submit to random urine screens while the terms and conditions of the Second Order remained in full force and effect.
12. For the foregoing reasons, the Department believes that respondent's practice of nursing 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 contain confidential information protected by federal and state law. 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**

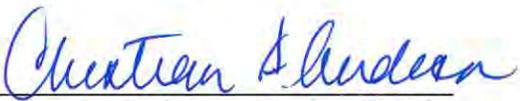
In Re: Laura Kisatsky, RN

Petition No. 2020-541

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 Laura Kisatsky's nursing license in Connecticut. This motion is based on the attached Statement of Charges, affidavit and on the Department's information and belief that the Laura Kisatsky's practice of nursing represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 15th day of June 2020.



Christian D. Andresen, 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: Laura Kisatsky, RN

Petition No. 2020-541

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 Laura Kisatsky:

COUNT ONE

1. Laura Kisatsky of Cornwall, Connecticut ("respondent") is the holder of Connecticut registered nurse license E57105.
2. On March 6, 2019, the Board ordered a Memorandum of Decision in Petition No. 2018-691 ("First Order") based upon respondent's morphine abuse. The Order placed respondent's license on probation and required her, in part, to (a) submit to random urine screens all of which must be negative; and (b) prohibited her from obtaining and/or using controlled substances.
3. On or about April 14, 2020, respondent abused and/or utilized to excess fentanyl and/or norfentanyl while the terms and conditions of the First Order remained in full force and effect.
4. Respondent's abuse and/or utilization to excess of fentanyl and/or norfentanyl does and/or may affect her practice of nursing.
5. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 including but not limited to §20-99(b)(5).

COUNT TWO

6. Paragraphs 1 and 2 are incorporated herein by reference as if set forth in full.
7. On or about April 14, 2020, respondent's urine tested positive for fentanyl and/or norfentanyl while the terms and conditions of the First Order remained in full force and effect.
8. On April 15, 2020, the Board ordered a Memorandum of Decision in Petition No. 2018-1416, ("Second Order") based upon respondent's alcohol abuse. The Order, in part, required respondent to submit to random urine drug screens.
9. On or about May 7, 2020, May 12, 2020, May 22, 2020, and/or May 28, 2020 respondent failed to submit to random urine drug screens while the terms and conditions of the Second Order remained in full force and effect.
10. On or about April 14, 2020, respondent's urine tested positive for fentanyl and/or norfentanyl.
11. Respondent's conduct as described above constitutes violations of the First and Second Order's probationary terms and subjects her license to revocation or other disciplinary action as authorized by Connecticut General Statutes §§19a-17 and 20-99(b).

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 15th day of June 2020.



Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Deidre S. Gifford, MD, MPH
Acting Commissioner



Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING

In re: Kimberly Lemire, RN

Petition No. 2019-1237

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 155761 of **Kimberly Lemire**, 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
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 17th day of June 2020, at 9:00 a.m., at the Department of Public Health, 410 Capitol Avenue, Hartford, CT.

Dated at Waterbury, Connecticut this 20th day of May, 2020.

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



Phone: (860) 509-7566 • Fax: (860) 707-1904
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410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph



**STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING**

Kimberly Lemire
46 Reservoir Road
Pascoag, RI 02859

CMRRR# 91 7199 9991 7038 3998 2478
and Via EMAIL (kimberly.lemire@yahoo.com)
and First Class Mail

RE: Kimberly Lemire, RN - Petition No. 2019-1237

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 410 Capitol Avenue, Hartford, Connecticut on June 17, 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 22nd day of May, 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
Joelle Newton, Staff Attorney, Office of Legal Compliance

The Department of Public Health is an equal opportunity provider and employer.

*If you require aid/accommodation to participate fully and fairly,
please contact the Public Health Hearing Office at 860-509-7566.*

**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.

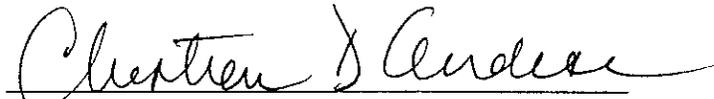
6. On various occasions between October and November 2019, while practicing nursing at Villa Maria Nursing and Rehabilitation Center, in Plainville, Connecticut respondent:
 - a. failed to properly administer and/or document administration of controlled substances to patients;
 - b. falsified, maintained 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 practicing nursing in a substandard and/or carelessness manner.
9. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99(b), including but not limited to: §20-99(b)(2); §20-99(b)(6) and/or §20-99(b)(7).

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 7th day of May, 2020.


Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

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Your item is back at the PASCOAG, RI 02859 post office following a delivery attempt at 5:29 pm on June 1, 2020 and is available for redelivery or pickup.

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June 1, 2020 at 5:29 pm
Available for Redelivery or Pickup
PASCOAG, RI 02859

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Schedule Redelivery 

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June 1, 2020, 5:29 pm
Available for Redelivery or Pickup
PASCOAG, RI 02859

Your item is back at the PASCOAG, RI 02859 post office following a delivery attempt at 5:29 pm on June 1, 2020 and is available for redelivery or pickup.

Reminder to Schedule Redelivery of your item before June 24, 2020

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May 26, 2020, 8:12 am

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May 26, 2020, 8:01 am

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May 26, 2020, 3:51 am

Departed USPS Regional Facility
PROVIDENCE RI DISTRIBUTION CENTER

May 25, 2020

In Transit to Next Facility

May 23, 2020, 11:22 am

Arrived at USPS Regional Facility
PROVIDENCE RI DISTRIBUTION CENTER

May 22, 2020, 8:47 pm

Departed USPS Regional Facility
HARTFORD CT DISTRIBUTION CENTER

May 22, 2020, 8:38 pm

Arrived at USPS Regional Facility
HARTFORD CT DISTRIBUTION CENTER

Feedback

May 22, 2020, 7:23 pm
Accepted at USPS Origin Facility
HARTFORD, CT 06106

May 22, 2020
Pre-Shipment Info Sent to USPS, USPS Awaiting Item

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FAQs

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STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Deidre S. Gifford, MD, MPH
Acting Commissioner



Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING

In re: **Kimberly Smith, LPN**

Petition No. 2019-592

SUMMARY SUSPENSION ORDER

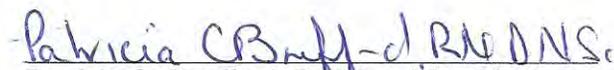
WHEREAS, the Department of Public Health having moved for an order of summary suspension in this matter and having submitted duly verified affidavits in support of its motion; and

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 031191 of **Kimberly Smith**, 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 17th day of June 2020, at 9:00 a.m., at the Department of Public Health, 410 Capitol Avenue, Hartford, CT.

Dated at Waterbury, Connecticut this 20th day of May, 2020.


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



Phone: (860) 509-7566 • Fax: (860) 707-1904
Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
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**STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING**

Kimberly Smith
818 Main Street
Watertown, CT 02859

CMRRR# 91 7199 9991 7038 3998 2492
and Via EMAIL (kimmismi39@gmail.com)
and First Class Mail

30 Saugas Avenue, Apt, 2
Oakville, CT 06779

CMRRR# 91 7199 9991 7038 3998 2485
and First Class Mail

RE: Kimberly Smith, LPN - Petition No. 2019-592

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 410 Capitol Avenue, Hartford, Connecticut on June 17, 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 22nd day of MAY, 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
Joelle Newton, Staff Attorney, Office of Legal Compliance

The Department of Public Health is an equal opportunity provider and employer.

*If you require aid/accommodation to participate fully and fairly,
please contact the Public Health Hearing Office at 860-509-7566.*

**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

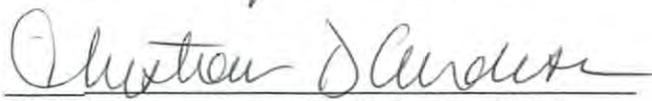
Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Kimberly Smith:

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

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May 25, 2020, 7:47 pm
Departed USPS Regional Facility
HARTFORD CT DISTRIBUTION CENTER

May 25, 2020
In Transit to Next Facility

May 22, 2020, 8:38 pm
Arrived at USPS Regional Facility
HARTFORD CT DISTRIBUTION CENTER

May 22, 2020, 7:23 pm
Accepted at USPS Origin Facility
HARTFORD, CT 06106

May 22, 2020
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HARTFORD, CT 06114

Get Updates 

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Tracking History



May 30, 2020, 7:34 am

Delivered, To Original Sender
HARTFORD, CT 06114

Your item has been delivered to the original sender at 7:34 am on May 30, 2020 in HARTFORD, CT 06114.

May 30, 2020, 7:32 am

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HARTFORD, CT 06114

May 30, 2020, 1:30 am

Departed USPS Regional Facility
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May 26, 2020, 4:11 pm

Insufficient Address
OAKVILLE, CT 06779

May 26, 2020

In Transit to Next Facility

May 22, 2020, 8:38 pm

Arrived at USPS Regional Facility
HARTFORD CT DISTRIBUTION CENTER

May 22, 2020, 7:23 pm

Accepted at USPS Origin Facility
HARTFORD, CT 06106

May 22, 2020

Pre-Shipment Info Sent to USPS, USPS Awaiting Item

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STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH



Deidre S. Gifford, MD, MPH
Acting Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING

In re: Sara Smith, RN

Petition No. 2020-373

SUMMARY SUSPENSION ORDER

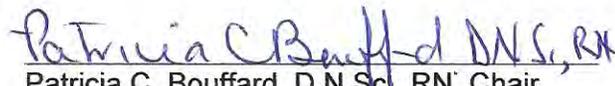
WHEREAS, the Department of Public Health having moved for an order of summary suspension in this matter and having submitted duly verified affidavits in support of its motion; and

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 122048 of **Sara Smith**, 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
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 17th day of June 2020, at 9:00 a.m., at the Department of Public Health, 410 Capitol Avenue, Hartford, CT.

Dated at Waterbury, Connecticut this 20th day of May, 2020.


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



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410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
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**STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING**

Sara Smith
c/o Cody Guarnieri
Brown, Paindiris & Scott
100 Pearl Street
Hartford, CT 06103

**CMRRR# 91 7199 9991 7038 3998 2508
and VIA EMAIL (cguamieri@bpslawyers.com)**

RE: Sara J. Smith, RN - Petition No. 2020-373

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 410 Capitol Avenue, Hartford, Connecticut on June 17, 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:**

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- 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 22nd day of MAY, 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
Joelle Newton, Staff Attorney, Office of Legal Compliance

The Department of Public Health is an equal opportunity provider and employer.

*If you require aid/accommodation to participate fully and fairly,
please contact the Public Health Hearing Office at 860-509-7566.*

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Sara Smith, RN

Petition No. 2020-373

STATEMENT OF CHARGES

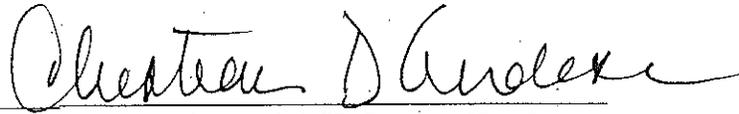
Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Sara Smith:

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

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

: PETITION NO. 2020-373

IN RE: Sara Smith :

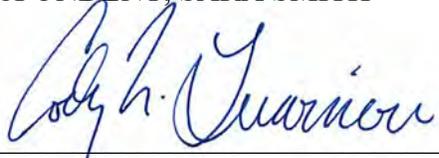
: MAY 14, 2020

ANSWER TO STATEMENT OF CHARGES

The Respondent, Sara Smith, R.N., hereby responds to the Statement of Charges dated April 30, 2020, as follows:

1. Paragraph 1 is admitted.
2. Paragraph 2 is admitted.
3. Paragraph 3 is admitted to the extent that the respondent tested positive for oxymorphone and/or propoxyphene;
4. Paragraph 4 is admitted to the extent that the respondent tested positive for oxymorphone;
5. Paragraph 4 is denied in respondent does not constitute a present clear and imminent danger to the public health and safety if she is allowed to continue to practice.

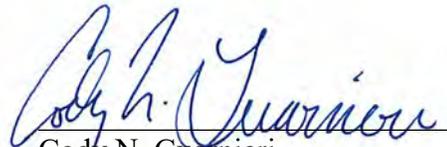
RESPONDENT, SARA SMITH

By 

Cody N. Guarnieri, Esq.
Brown Paindiris & Scott, LLP
100 Pearl Street, Suite 200
Hartford, CT 06103
(Tel.) 860-522-3343
(Fax) 860-522-2490
cody@bpslawyers.com

CERTIFICATION

A copy of this Answer was emailed to Attorney Joelle Newton, Staff Attorney for the Connecticut Department of Public Health, to Joelle.Newton@ct.gov and Jeffrey A. Kardys, Administrative Hearings Specialist, Connecticut Department of Public Health, to Jeffrey.Kardys@ct.gov, on this 14th day of May, 2020.


Cody N. Guarnieri

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

: PETITION NO. 2020-373

IN RE: Sara Smith :
: MAY 18, 2020

OBJECTION TO PETITION FOR SUMMARY SUSPENSION

The Respondent, Sara Smith, R.N., hereby objects to the Petition for Summary Suspension filed by the Department of Public Health, dated April 30, 2020. In support of her objection, the Respondent states the following:

1. The Respondent, Ms. Sara Smith (“Smith”) is a 2017 graduate of St. Vincent’s College and is the holder of Connecticut registered nursing licenses number 122048.
2. Ms. Smith has not been subject to discipline by the Board in the past.
3. 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.
4. On about March 3, 2020, the Respondent tested positive for Oxymorphone (216 ng/mL). She also tested positive for Oxymorphone on April 14, 2020 (299 ng/mL). Both results were through LabCorp.

5. Since March 27, 2020, the Respondent has been engaged in an intensive outpatient treatment program through Griffin Hospital.

6. During the course of her treatment at Griffin Hospital, the respondent has also been subject to urine testing, including a second test on April 14, 2020, which was negative for opiates and Oxycodone.

7. All of the respondent's urine testing through the Griffin Hospital IOP have been negative for any substances.

8. Moreover, on March 13, 2020, the Respondent underwent a 17 Drug Panel hair follicle test through Omega Laboratories. The results of this test were also negative for the presence of all substances, supporting that the Respondent was not engaged in the chronic use of substances.

9. Respondent has acknowledged to her treatment providers at Griffin Hospital that she suffered a relapse related to situational depression, relationship difficulties, and stressors related to her nursing license.

10. Per the letter of Mary Ellen Gallagher, her clinician at Griffin Hospital, "Sara began Griffin IOP on 3/30/2020. She attends 3 days a week for 3 hours a day. She has been compliant with all program rules. Sara has been an active group member who gives and accepts feedback in a positive manner. She had a positive urine screen on April 14, 2020 that we are aware of. She is working hard on her recovery and appears motivated to improve her life. **This writer believes Sara is in a very healthy place at this time.**" (Emphasis added).

11. Under Connecticut General Statutes Section 4-182(c) "... If the agency finds that public health, safety or welfare imperatively requires emergency action, and incorporates a finding to that effect in its order, summary suspension of a license may be ordered pending proceedings for revocation or other action."

12. Moreover, Connecticut General Statutes Section 19a-17(c) indicates that the Board "...may summarily suspend a practitioner's license or permit in advance of a final adjudication or during the appeals process if such board or commission or the department finds that a practitioner or permittee represents a clear and immediate danger to the public health and safety if he is allowed to continue to practice."

13. The records provided by Ms. Smith evidence that she is not presently have a chronic use pattern, as evidenced by her negative hair follicle test from March. Moreover, Ms. Smith had immediately taken steps following her relapse, through the Griffin Hospital IOP, to gain insight into the causes of her relapse and take proactive steps to address the same.

14. There is no evidence on the record before the Board to support that her relapse impacted her ability to provide competent nursing service, nor that the respondent was in any way impaired in her nursing duties.

15. According to the opinion of Ms. Gallagher, which is un rebutted, Ms. Smith is in a healthy place at this time. She continues to be diligent engaged in her treatment.

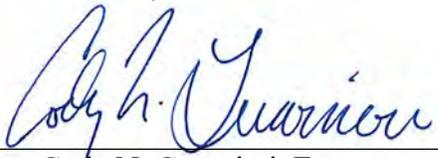
16. As such, the documentation before the Board does not support that Ms. Smith poses an immediate danger to the public health and safety if she were permitted to continue in

her nursing position during the pendency of this administrative matter. This, there is no reason to believe that the public health, safety or welfare imperatively requires emergency action in this case.

17. A relapse is a symptom of Ms. Smith's disease and substance use disorders generally. In this case, Ms. Smith's actions following her relapse demonstrate her commitment to sobriety and personal responsibility for her conduct. The Board should encourage earnest and immediate interventions following a relapse, such as demonstrated in this case.

WHEREFORE, the Respondent respectfully requests that the Board deny the Department's Motion for Summary Suspension in this case.

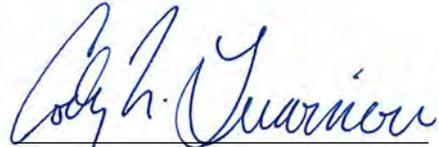
RESPONDENT, SARA SMITH

By 

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CERTIFICATION

A copy of this Answer was emailed to Attorney Joelle Newton, Staff Attorney for the Connecticut Department of Public Health, to Joelle.Newton@ct.gov and Jeffrey A. Kardys, Administrative Hearings Specialist, Connecticut Department of Public Health, to Jeffrey.Kardys@ct.gov, on this 18th day of May, 2020.



Cody N. Guarnieri



05/12/2020

RE: Sara Smith

DOB: [REDACTED]

Sara began Griffin IOP on 3/30/2020. She attends 3 days a week for 3 hours a day. She has been compliant with all program rules. Sara has been an active group member who gives and accepts feedback in a positive manner. She had a positive urine screen on April 14, 2020 that we are aware of. She is working hard on her recovery and appears motivated to improve her life. This writer believes Sara is in a very healthy place at this time.

If you have any further questions please call me at 203-732-7541. I would be happy to speak with you.

Respectfully,

Mary Ellen Gallagher ADC

Mary Ellen Gallagher ADC

Therapist, Griffin Hospital IOP Program



130 Division Street | Derby, CT 06418 | Tel: 203.735.7421
A teaching affiliate of the Yale University School of Medicine
www.griffinhealth.org

Griffin Hospital Laboratory
Stephanie Wain MD - Medical Director
130 Division Street Derby, CT 06418
Phone: 203-732-7280

Page: 1

CLIA: 07D0644649 / 07D0096294

DPH: HP-0207 HP-0298 BB-1040

Specimen Report

Patient : Smith, Sara Acct: V00009802935 DR: Dawe, Maria MD
Birthdate: ██████████ Age/Sex: 28/F MRN: M000580372
Loc: OP Lab Specimen Other DEP REF
Copy to:
; Dawe, Maria MD; Robert V Dawe; ~

SPEC : 0410:R00004R COLL: 04/10/20-1105 STATUS: COMP REQ : 00304917
RECD: 04/10/20-1105 SUBM DR: Dawe, Maria MD
ENTERED: 04/10/20-0758 OTHR DR: Robert V Dawe
ORDERED: DRUG TOX 6 URIN

Test	Result	Flag	Reference
AMPHETAMINES UR	NEGATIVE		<500 ng/mL
BARBITURATES UR	NEGATIVE		<300 ng/mL
BENZO URINE	NEGATIVE		<100 ng/mL
MARIJUANA METAB	NEGATIVE		<20 ng/mL
COCAINE METABOL	NEGATIVE		<150 ng/mL
METHADONE URINE	NEGATIVE		<100 ng/mL
OPIATES URINE	NEGATIVE		<100 ng/mL
OXYCODONE URINE	NEGATIVE		<100 ng/mL
PHENCYCLIDINE U	NEGATIVE		<25 ng/mL
Always Message	SEE NOTE		
	See Note 1		
	Note 1		
	This drug testing is for medical treatment only.		
	Analysis was performed as non-forensic testing and		
	these results should be used only by healthcare		
	providers to render diagnosis or treatment, or to		
	monitor progress of medical conditions.		
	For assistance with interpreting these drug results,		
	please contact a Quest Diagnostics Toxicology		
	Specialist: 1-877-40-RX TOX (1-877-407-9869), M-F,		
	8am-6pm EST.		
	THIS TEST WAS PERFORMED AT:		
	QUEST DIAGNOSTICS LLC		
	200 FOREST STREET 3RD FLOOR, SUITE B		
	MARLBOROUGH, MA 01752-3023		
	SALIM E KABANAT, MD		

** END OF REPORT **

Griffin Hospital Laboratory
 Stephanie Wain MD - Medical Director
 130 Division Street Derby, CT 06418
 Phone: 203-732-7280

Page: 1

CLIA: 07D0644649 / 07D0096294 DPH: HP-0207 HP-0298 BB-1040

Specimen Report

Patient : Smith, Sara Acct: V00009836313 DR: Dawe, Maria MD
 Birthdate: ██████████ Age/Sex: 28/F MRN: M000580372
 Loc: OP Lab Specimen Other DEP REF
 Copy to:
 ; Dawe, Maria MD; ~

SPEC : 0424:R00024R COLL: 04/24/20-1110 STATUS: COMP REQ : 00311313
 RECD: 04/24/20-1233 SUBM DR: Dawe, Maria MD

ENTERED: 04/24/20-1233 OTHR DR:
 ORDERED: DRUG TOX 6 URIN

Test	Result	Flag	Reference
AMPHETAMINES UR	NEGATIVE		<500 ng/mL
BARBITURATES UR	NEGATIVE		<300 ng/mL
BENZO URINE	NEGATIVE		<100 ng/mL
MARIJUANA METAB	NEGATIVE		<20 ng/mL
COCAINE METABOL	NEGATIVE		<150 ng/mL
METHADONE URINE	NEGATIVE		<100 ng/mL
OPIATES URINE	NEGATIVE		<100 ng/mL
OXYCODONE URINE	NEGATIVE		<100 ng/mL
PHENCYCLIDINE U	NEGATIVE		<25 ng/mL
Always Message	SEE NOTE		
See Note 1 Note 1 This drug testing is for medical treatment only. Analysis was performed as non-forensic testing and these results should be used only by healthcare providers to render diagnosis or treatment, or to monitor progress of medical conditions. For assistance with interpreting these drug results, please contact a Quest Diagnostics Toxicology Specialist: 1-877-40-RX TOX (1-877-407-9869), M-F, 8am-6pm EST. THIS TEST WAS PERFORMED AT: QUEST DIAGNOSTICS LLC 200 FOREST STREET 3RD FLOOR, SUITE B MARLBOROUGH, MA 01752-3023 SALIM E KABAWAT, MD			

** END OF REPORT **

Griffin Hospital Laboratory
Stephanie Wain MD - Medical Director
130 Division Street Derby, CT 06418
Phone: 203-732-7280

Page: 1

CLIA: 07D0644649 / 07D0096294

DPH: HP-0207 HP-0298 BB-1040

Specimen Report

Patient : Smith, Sara Acct: V00009860925 DR: Dawe, Maria MD
Birthdate: ██████████ Age/Sex: 28/F MRN: M000580372
Loc: OP Lab Specimen Other DEP REF
Copy to:
; Dawe, Maria MD; ~

SPEC : 0501:R00047R COLL: 05/01/20-1110 STATUS: COMP REQ : 00314501
RECD: 05/01/20-1234 SUBM DR: Dawe, Maria MD

ENTERED: 05/01/20-1234
ORDERED: DRUG TOX 6 URIN

OTHR DR:

Test	Result	Flag	Reference
AMPHETAMINES UR	NEGATIVE		<500 ng/mL
BARBITURATES UR	NEGATIVE		<300 ng/mL
BENZO URINE	NEGATIVE		<100 ng/mL
MARIJUANA METAB	NEGATIVE		<20 ng/mL
COCAINE METABOL	NEGATIVE		<150 ng/mL
METHADONE URINE	NEGATIVE		<100 ng/mL
OPIATES URINE	NEGATIVE		<100 ng/mL
OXYCODONE URINE	NEGATIVE		<100 ng/mL
PHENCYCLIDINE U	NEGATIVE		<25 ng/mL
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	See Note 1		
	Note 1		
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	200 FOREST STREET 3RD FLOOR, SUITE B		
	MARLBOROUGH, MA 01752-3023		
	SALIM E KABAWAT, MD		

** END OF REPORT **

Griffin Hospital Laboratory Stephanie Wain MD - Medical Director 130 Division Street Derby, CT 06418 Phone: 203-732-7280		Page: 1
CLIA: 07D0644649 / 07D0096294	Specimen Report	DPH: HP-0207 HP-0298 BB-1040
Patient : Smith, Sara	Acct: V00009878901	DR: Dawe, Maria MD
Birthdate: ██████████	Age/Sex: 28/F	MRN: M000590372
Loc: OP Lab Specimen Other	REG REF	
Copy to: ; Dawe, Maria MD; ~		

SPEC : 0507:R00059R	COLL: 05/07/20 -1110	STATUS: COMP	REQ : 00317024
	RECD: 05/07/20 -1211	SUBM DR: Dawe, Maria MD	
ENTERED: 05/07/20 -1211		OTHR DR:	
ORDERED: DRUG TOX 6 URIN			

Test	Result	Flag	Reference
AMPHETAMINES UR	NEGATIVE		<500 ng/mL
BARBITURATES UR	NEGATIVE		<300 ng/mL
BENZO URINE	NEGATIVE		<100 ng/mL
MARIJUANA METAB	NEGATIVE		<20 ng/mL
COCAINE METABOL	NEGATIVE		<150 ng/mL
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OXYCODONE URINE	NEGATIVE		<100 ng/mL
PHENCYCLIDINE U	NEGATIVE		<25 ng/mL
Always Message	SEE NOTE		
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	200 FOREST STREET 3RD FLOOR, SUITE B		
	MARLBOROUGH, MA 01752-3023		
	SALIM E KABAWAT, MD		

** END OF REPORT **

***Live* Griffin Hospital**

Smith, Sara Female DOB: [REDACTED] MedRec# M000580372

03/30/20 09:04 - Psych Diagnostic Assess by Nicole Breault, LMSW

Acct Num: V00009740523 DOB: 05/23/1991 Patient Age: 28

Acute/Chronic Problems

Opioid dependence, uncomplicated (Acute)
Major depressive disorder, single episode, unspecified (Acute)

Diagnostic Assessment

Psych Diagnostic Assessment Start: 03/27/20 10:11
Freq: Status: Active
Protocol:
Document 03/27/20 10:12 NBREAULT (Rec: 03/27/20 10:19 NBREAULT Desktop)
Psych Diagnostic Assessment

Basic Assessment

Service Date	03/27/20
Start Time	10:24
End Time	11:25
Primary Insurance	BC
Secondary Insurance	SP
Chief Complaint (Patient's quote)	"I'm a nurse in recovery and I had a relapse."
Present Problem/Reason for referral	Patient is a 28 yr old married Caucasian female who is self-referred to IOP for a recent relapse with oxycodone with increased depression and anxiety. Pt presents to intake A&Ox3. She presents with a depressed mood and tearful affect. Pt denies SI/HI/AH/VH. She reports that she relapsed on 3/01/20 and prior to this she was sober a little over one year. She reports she relapsed on one occasion with oxycodone, however prior to this her use was "on and off for 10 years." Per IOP screening call, pt reported using "whatever I could get my hands on" and listed percocet, morphine and dilaudid. She denies other substance use. She denies urges to use. She stated "I used it for depression." She reports feeling depressed for a couple months now and states that it

History of behavioral functioning

is "situational." She reports her depression is a 6/10 and anxiety 5/10, on a scale of 1-10 with 10 being most severe. She states she has been having "obsessive thoughts" about her nursing license. She reports that her sleep is "ok" and gets 5-6 hours per night. She reports having a poor appetite. She reports that she has not been working due to her relapse. She reports that she had a great job at Bridgeport Hospital as a nursing manager. She reports shame and guilt for jeopardizing this job. She reports having a lot of anger with herself for relapsing. She stated, "I don't know why I don't learn. I think I can handle it, like I'm above it, because I'm high functioning." She reports that she was involved with Haven in 2017-2018 and due to her continued opiate use she was transferred to working with DPH and now is facing suspension or loss of her license. She identifies this as her primary stressor, along with her "toxic co-dependent" relationship with her husband. She reports that they have been together 14 years and married 6 months. Pt reports her mother began giving her opiates at 10 years old, to sleep. She reports hx of trauma including witnessing domestic violence, being removed from her home by DCF, and getting into a serious accident due to her mother being under the influence. She reports that her mother is still an active opiate user and her father is a recovering alcoholic. She reports that her mother has significant mental health issues. She reports one episode of a 48 hour hold at hallbrooke in 2017 in the context of her SA. He reports she went to IOL's professional IOP in 2017. She denies detox /rehab, stating that she never needed it because her use was

<p>Impact of illness on family/significant other/social support</p> <p>Impact of illness on employment</p> <p>Family History</p> <p>Family of Origin (who raised pt, siblings, family life)</p> <p>Current family relationships/dynamics</p> <p>Family History of Psych/Substance Issues /Treatment</p> <p>Abuse/Trauma/Bereavement History</p> <p>Trauma History/Current Trauma</p> <p>Victim or Perpetrator?</p> <p>Patient's age at the time of trauma</p>	<p>sporadic. She reports using 4 -5 days in a row and then would discontinue use for sometimes months at a time. She denies hx of chronic daily use. She reports that she is currently seeing a therapist biweekly, Tom Reilly addictions counselor in Woodbridge. She states that he is reporting her SA/MH updates to DPH. She reports that she has a sponsor and attends AA/NA meetings. She reports that since covid-19 she has been attending zoom meetings a couple times per week. She reports that her other coping skill is exercising, however this has been difficult too.</p> <p>"A lot"</p> <p>"It made it easier to go to work"</p> <p>Pt reports she grew in Trumbull with mom, dad, and sister. She reports DCF involvement as a child. She reports her parents separated when she was 4 yrs old however continued to live together because "dad couldn't leave mom alone with us." She reports her mother is an active opiate user and father was an alcohol user, sober now</p> <p>She describes her marriage as a "toxic shitty situation." She reports that they were together for 14 years, married 6 months. she reports that they are living separate from each other. She reports that her and her husband as "trauma bonded and codependent." She reports that they got into an argument last week and he broke her windshield. Pt identifies her sponsor and friends in the program, and dad, as other supports. Mom-opiates, Dad-alcohol</p> <p>Emotional, Witness</p> <p>Victim</p> <p>Childhood</p>
---	--

History of trauma treatment	No
PTSD Comment	Mom car accident-driving under the influence Witnessing "domestic stuff" Mother was in and out of jail DCF involvement-removed from the home to live with relatives Denies
Bereavement details	
Psychiatric Treatment History	
Does patient have a psychiatric treatment history	Yes
Psychiatric Treatment History	
Inpatient	
Location of Treatment	Hallbrooke
Date of Treatment	Dec 2017
Reason for Treatment	48 hours-SA
Response to Treatment	D/c to IOP
Nicotine Use/Hx	
Smoking Status	Never Smoker
Substance Treatment History	
Does patient have a substance abuse history?	Yes
Does patient have a substance abuse treatment history?	Yes
Substance/Alcohol Abuse History	
Non-Prescribed Opiate	
First Use	10 yrs old
Last Used	03/01
How much used/taken	20mg in one day
How often	couple times per week in past
How long	10 yrs-heavily over the last 4 years ingest
Route of use	
Substance/Alcohol Treatment History	
Outpatient Older than 12 months	
Location of Treatment	IOL-Professionals IOP
Date of Treatment	2017-2018
Reason for Treatment	SA
Response to Treatment	Engaged
Sobriety	
Longest Period of Sobriety	1 yrs
Relapse history	Yes
Do you/have you attended AA/NA? (Comment Currently/Past)	Yes
Do you have a sponsor	Yes
Toxicology	
Toxicology screen completed	Yes
Audit-C Questionnaire	
How often do you have a drink containing alcohol?	never
How many drinks containing alcohol do you have on a typical day?	1 to 2
How often do you have 6 or more drinks on 1 occasion?	never
AUDIT-C Alcohol total score	0 - No Review Req.
AUDIT-C result reviewed/action taken	Yes
Psych Medications	
Patient's report of current psych meds	Gabapentin 300mg 3x per day (not taking it, helps moods)

Patient's report of previous psych meds	zoloft (high school) Abilify Celebrex
Medical	
Last Physical	03/01/19
History of seizures (enter date of last seizure)	No
History of blackouts (enter last date of blackout)	No
Last dental exam	6-12 months
Nutritional Assessment	
Please include details about cause of weight change and number of lbs. lost	
Food Allergies noted (reviewed & confirmed-Allergy Routine)	None
Appetite Description	Poor
How many meals do you have per day?	2
Do you have snacks?	No
Daily caffeine intake	4
Do you frequently eat for reasons other than hunger?	No
Binge/Purge Behaviors	No
Recent weight change	None
Have you gained or lost 10 or more lbs. in the last 90 days? *If yes and unintentional, referral to PCP for further nutritional assessment is required.	No
Is referral to PCP for nutritional assessment needed?	No
If no PCP, was list of PCPs given to patient?	No
Pain Assessment	
Hx Pain	No
Pain Present	No Pain Reported
Are you being treated for the pain	No
Is further pain assessment recommended?	No
Sexual History	
Are you currently sexually active?	No
Have you ever been sexually active?	Yes
Number of lifetime partners	8
Sexual Orientation	Heterosexual
Use Protection	No
Sexual concerns	None
Patient Pregnant?	No
Delivered in last year?	No
Breast feeding? (child age)	No
Physical Abilities	
Physical Limitations and Interventions	WNL
Walking, talking, fine/gross motor	WNL
Living Situation	
Present living situation (where. with whom)	Pt reports that she is living alone in Shelton.
Do you feel safe where you live?	Yes
Marital/relationship status	Married
Relationship name and length	6 months
Do you feel safe in your relationship?	No
Do you have children (ages in comment box)	No
Educational/Ethnic History	

Preferred Language	English
Cultural/Ethnic Issues	None
Highest education level completed	Bachelor's degree
How well did you do in school	"good"
Preferred areas of study	Nursing
Plans for future education	Started masters
Preferred Learning Style	Experiential
Occupation/Employment	
Current occupational status	previously employed
Employment History	Bridgeport Hospital Nursing Supervisor
Military Service	
Military service	No
Strengths/Limitations	
Strengths/Capabilities	"really organized, clean, responsible, I care able people"
Limitations	"really hard on myself, I try to people please"
Current Relationships (friend, social, peer support)	AA/NA friends
Meaningful Activities (community, volunteer, leisure/rec, etc)	Gardening, working out, friends with AA/NA
Religion/Spirituality	
Religion during childhood	Catholic
Current religious affiliation	Catholic
Is spirituality important to you	Yes
Financial	
Financial Status	Supports Self/Family Without Assistance
Legal History	
Current Legal Status	None
Relationship to present condition	Pt is currently involved with DPH. Due to covid-19, her court date has been postponed. She reports that she gives urines 2x per week.
Mental Status	
Orientation	Person, Place, Situation
Mood/Affect	Sad
Speech Pattern	Normal for Patient
Neuro-Vegetative	Patient's stated Normal
Personal Hygiene Status	Good
Patient Appearance	Groomed
Thoughts/Behaviors	
Thought Process	Intact, Organized, Rational
Hallucination Type	None
Delusion Description	Not Present
Insight	Fair
Memory	Grossly intact
Risk SI/HI Assessment	
Past suicidal ideation	No
Past suicidal attempt	No
Current suicidal ideation	No
Current suicidal attempt	No
Past homicidal ideation	No
Past homicidal attempt	No
Current homicidal ideation	No
Current homicidal attempt	No
Degree of intent	None

Gravely disabled
Danger to

Not gravely disabled
No Danger to others/property/
self

Risk factors

SA/MH hospitalized, Substance
abuse, Isolate/no social
support, Limited support

Protective Factors

"hopes that I'll get back to
how successful I was"

Family History of Suicide
Initial Treatment Plan/Goals

Maternal grandfather

Recommended Treatment

IOP

Track/Group:

Eve

Start Date

03/30/20

Initial Treatment Plan/Goals

Symptom Stabilization, Group
Therapy, Individual Therapy,
Implement Coping Skills, UDS/
Breathalyzer, Medication
Evaluation, 12 Step Attendance,
Relapse Prevention Skills

Clinical Summary

What do you hope to Accomplish during tx
(Pt quote)

"have better judgement skills
and coping better, be okay
with being by myself, not
being so codependant."

Clinical Summary

Patient is a 28 yr old married
Caucasian female who is self-
referred to IOP for a recent
relapse with oxycodone with
increased depression and
anxiety. She denies SI/HI/AH/
VH. She denies hx of attempts.
She denies self-harm. She
reports one 48 hr
hospitalization at Hallbrooke
in 2017, followed by IOP at
IOL. She is currently seeing a
counselor and is involved
with DPH. She reports 10 yrs
of opiate abuse "on and off."
She denies other substances.
She demonstrates motivation to
change. She requests to join
Eve starting on 3/30.

Diagnosis

Medical Problems

Migranes

Kidney stones

Stressors

Stressors

Marital discord/relationship
issues, Involvement in legal
system, Other, Employment
problem, Primary support
problem, Educational problem

Assessment Scales

GAF

38

WHODAS Date

03/27/20

WHODAS Score

36

Date WHODAS Due

09/27/20

PCLC Date

03/27/20

PCLC Score

17

Date PCLC Due

09/27/20

Additional Assessment Scales

BDI-2:21
 Anxiety:6
 MMSE:30/30

Columbia-Suicide Severity Rating Scale

SUICIDAL IDEATION

Ask questions 1 and 2. If both are negative, proceed to "Suicidal Behavior" section. If the answer to question 2 is "yes", ask questions 3, 4 and 5. If the answer to question 1 and/or 2 is "yes", complete "Intensity of Ideation" section below.

1. Wish to be dead

Subject endorses thoughts about a wish to be dead or not alive anymore, or wish to fall asleep and not wake up.

A wish to be dead or not alive anymore No
 or to fall asleep and not wake up?

If yes, describe:

Pt denies SI with plan/intent.

2. Non-Specific Active Suicidal Thoughts

General, non-specific thoughts of wanting to end one's life/commit suicide (e.g., "I've thought about killing myself") without thoughts of ways to kill oneself/associated methods, or plan during the assessment period.

Have you actually had any thoughts of No
 killing yourself?

If yes, describe:

Pt denies SI with plan/intent.

Suicide Severity Risk Level

Low

INTENSITY OF IDEATION

The following features should be rated with respect to the most severe type of ideation (i.e. 1-5 from above, with 1 being the least severe and 5 being the most severe). Ask about time he/she was feeling most suicidal.

SUICIDAL BEHAVIOR

Check all that apply, so long as these are separate events; must ask about all types

Actual Attempt:

Actual Attempt: A potentially self-injurious act committed with at least some wish to die, as a result of act. Behavior was in part thought of as method to kill oneself. Intent does not have to be 100%. If there is any intent/desire to die associated with the act, then it can be considered an actual suicide attempt. There does not have to be any injury or harm, just the potential for injury or harm. If person pulls trigger while gun is in mouth but gun is broken so no injury results, this is considered an attempt. Inferring Intent: Even if an individual denies intent/wish to die, it may be inferred clinically from the behavior or circumstances. For example, a highly lethal act that is clearly not an accident so no other intent but suicide can be inferred (e.g., gunshot to head, jumping from window of a high floor/story). Also, if someone denies intent to die, but they thought that what they did could be lethal, intent may be inferred.

Have you made a suicide attempt? No
 Have you done anything to harm yourself? No
 Have you done anything dangerous where No
 you could have died?
 Did you do this as a way to end your No
 life?
 Did you want to die (even a little) when No
 you did this?
 Were you trying to end your life when No
 you did this?
 Or did you think it was possible you No
 could have died from this action?
 Or did you do it purely for other No

reasons, without ANY intention of
killing yourself?

Lifetime: Total # of attempts 0
Past 3 Months: Total # of attempts 0
Has subject engaged in Non-Suicidal Self No
-Injurious Behavior?

Interrupted Attempt:

When the person is interrupted (by an outside circumstance) from starting the potentially self-injurious act (if not for that, actual attempt would have occurred). Overdose: Person has pills in hand but is stopped from ingesting. Once they ingest any pills, this becomes an attempt rather than an interrupted attempt. Shooting: Person has gun pointed toward self, gun is taken away by someone else, or is somehow prevented from pulling trigger. Once they pull the trigger, even if the gun fails to fire, it is an attempt. Jumping: Person is poised to jump, is grabbed and taken down from ledge. Hanging: Person has noose around neck but has not yet started to hang - is stopped from doing so.

Has there been a time you started to do No
something to end your life but it was
stopped by someone/something before you
actually did anything?

Aborted or Self-Interrupted Attempt:

When person begins to take steps toward making a suicide attempt, but stops themselves before they actually have engaged in any selfdestructive behavior. Examples are similar to interrupted attempts, except that the individual stops him/herself, instead of being stopped by something else.

Has there been a time when you started No
to do something to try to end your life
but you stopped yourself before you
actually did anything?

Preparatory Acts or Behavior:

Acts or preparation towards imminently making a suicide attempt. This can include anything beyond a verbalization or thought, such as assembling a specific method (e.g., buying pills, purchasing a gun) or preparing for one's death by suicide (e.g., giving things away, writing a suicide note).

Have you taken any steps toward making a No
suicide attempt or preparing to kill
yourself?

Clinical Assessment

Complete this area with a synopsis i.e., "Patient is assessed as low risk with an Intensity of Ideation score = 5 out of 25."

Clinical Assessment

patient is assessed as low
risk with an intensity of
ideation score of 0/25.

CSSRS Date/Score/Due

For OPS location please update C-SSRS Information

CSSRS Date 03/27/20
CSSRS Score 0
Date CSSRS Due 09/27/20

** Electronically signed by Nicole Breault, LMSW on 03/30/20 09:04 **

** Electronically signed by Maria Dawe, MD on 03/30/20 13:29 **

Initialized on 03/30/20 09:04 - END OF NOTE

***Live* Griffin Hospital**

Smith,Sara Female DOB: [REDACTED] MedRec# M000580372

04/30/20 11:46 - IOP Treatment Plan Update by Pacific T. Giordano, LCSW

Acct Num: V00009773102 DOB: 05/23/1991 Patient Age: 28

Acute/Chronic Problems

Bipolar disorder, current episode depressed, mild or moderate severity, unspecified (Acute)
 Opioid dependence, uncomplicated (Acute)
 Major depressive disorder, single episode, unspecified (Acute)

IOP Treatment Plan Update

IOP Treatment Plan Update

Start: 04/30/20 11:43

Freq:

Status: Active

Protocol:

Document 04/30/20 11:43 PGIORDANO (Rec: 04/30/20 11:46 PGIORDANO Desktop)

Treatment Plan Update

Treatment Plan

Service Date

04/30/20

Summary of progress

Patient has continued to remain sober throughout the course of IOP as evidenced by self-report and negative (-) UDS and breathalyzer results. Patient shares openly in group and offers supportive feedback to other group members. Patient identifies her pending DCF investigation regarding her nursing license and her relationship with her ex-husband as her primary stressors. She spoke of working with her lawyer on her nursing license and being frustrated that COVID-19 has delayed her case from proceeding. Patient states she has been sending applying for jobs not needing a nursing license, taking EMT classes online and working on establishing healthy boundaries with her ex-husband. Patient states she is currently in a relationship with a new person who is sober in recovery and respectful of her. Patient states that her past trauma and low self-esteem as a result have her

Griffin Hospital Laboratory
Stephanie Wain MD - Medical Director
130 Division Street Derby, CT 06418
Phone: 203-732-7280

Page: 1

CLIA: 07D0644649 / 07D0096294

DPH: HP-0207 HP-0298 BB-1040

Specimen Report

Patient : Smith, Sara Acct: V00009802935 DR: Dawe, Maria MD
Birthdate: ██████████ Age/Sex: 28/F MRN: M000580372
Loc: OP Lab Specimen Other DEP REF
Copy to:
; Dawe, Maria MD; Robert V Dawe; ~

SPEC : 0414:R00038R COLL: 04/14/20-1015 STATUS: COMP REQ : 00306775
RECD: 04/14/20-1210 SUBM DR: Dawe, Maria MD
ENTERED: 04/14/20-1210 OTHR DR:
ORDERED: DRUG TOX 6 URIN

Test	Result	Flag	Reference
AMPHETAMINES UR	NEGATIVE		<500 ng/mL
BARBITORATES UR	NEGATIVE		<300 ng/mL
BENZO URINE	NEGATIVE		<100 ng/mL
MARIJUANA METAB	NEGATIVE		<20 ng/mL
COCAINE METABOL	NEGATIVE		<150 ng/mL
METHADONE URINE	NEGATIVE		<100 ng/mL
OPIATES URINE	NEGATIVE		<100 ng/mL
OXYCODONE URINE	NEGATIVE		<100 ng/mL
PRENOCYCLIDINE U	NEGATIVE		<25 ng/mL
Always Message	SEE NOTE		
	See Note 1		
	Note 1		
	This drug testing is for medical treatment only.		
	Analysis was performed as non-forensic testing and		
	these results should be used only by healthcare		
	providers to render diagnosis or treatment, or to		
	monitor progress of medical conditions.		
	For assistance with interpreting these drug results,		
	please contact a Quest Diagnostics Toxicology		
	Specialist: 1-877-40-RX TOX (1-877-407-9869), M-F,		
	8am-6pm EST.		
	THIS TEST WAS PERFORMED AT:		
	QUEST DIAGNOSTICS LLC		
	200 FOREST STREET 3RD FLOOR, SUITE B		
	MARLBOROUGH, MA 01752-3023		
	SALIM E KABAWAT, MD		

** END OF REPORT **

feel she is not worthy of a healthy relationship. Patient states she misses having a routine of working and being healthy going to the gym. Discussed being creative about other ways to exercise and be active. Patient reports continuing to do online Zoom AA meetings as a community support. Patient will consider seeing an individual trauma focused therapist to address symptoms of trauma and low self-esteem.

Treatment Justifications

Improve/control psychiatric symptoms to prevent relapse/deterioration, Improve/maintain patients max level of indiv. and/or commun. function

Areas of Focus

Area of Focus #1

F11.20 Opioid dependence, uncomplicated

Goal #1 (quote)

"To stay sober and set healthy boundaries with my ex-husband ."

Objective #1

Query Text: Objective should be expressed in measurable terms, steps to achieve the goal and measurable target date

1. Sara will remain clean and sober as evidenced by self-report and negative randomized UDS/breathalyzer tests. 5/30/2020
2. Sara will identify triggers for relapse and will utilize group support for developing coping skills to manage triggers and maintain sobriety. 5/30/2020
3. Sara will attend at least two (2) self-help meetings (AA /NA/SMART Recovery) for additional sober support. 5/30/2020
4. Sara will identify and process at least 2 additional motivating factors for her sobriety. 5/30/2020
5. Sara will "find work again." 5/30/2020

Therapeutic Interventions #1 (include frequency and staff)

Individual Therapy-PTG/bi weekly
Group therapy-clinical staff-3 days/week, 3 hrs/day
Relapse prevention-clinical staff-3 days/week, 3 hrs/day
Psycho-education- clinical staff-3 days/week, 3 hrs/day

Area of Focus #2

F32.9 Major Depressive Disorder, single episode, unspecified

Goal #2 (quote)

"Will continue to stay engaged

Objective #2

Query Text:Objective should be expressed in measurable terms, steps to achieve the goal and measurable target date

in 12 Step program."

1. Sara will report overall improved mood during check in groups and will report use of at least three effective coping skills for the management of mood. 5/30/2020

2. Sara will learn to implement calming coping strategies to manage emotional reactions. 5/30/2020

3. Sara will identify, challenge, and replace fearful self-talk with reality based self-talk. 5/30/2020

4. Sara will take medications as prescribed and openly communicate with prescriber. 5/30/2020

5. Sara will "get into a positive mindset by finding new ways to stay active and exercise." 5/30/2020

6. Sara will "explore finding an individual trauma focused therapist." 5/30/2020

Therapeutic Interventions #2 (include frequency and staff)

Individual therapy-bi-weekly-PTG

Group therapy-3 days/week for 3 hrs/day-clinical staff

Medication Management-bi weekly-MD/APRN

Coping skills development-clinical staff-3 days/week, 3 hours/day

Diagnosis
Medical Problems
Stressors

Migraines, Kidney Stones
Marital discord/relationship issues, Involvement in legal system, Other, Employment problem, Primary support problem, Educational problem

Patient Signature: _____

Date: _____

Physician Signature: _____

Date: _____

Griffin Hospital
130 Division Street
Derby, CT 06418

Psych IOP Provider Progress Nt
Signed

Patient: Smith, Sara
DOB: [REDACTED]
Age/Sex: 28 / F
Loc: IOP.DUAL
Attending Dr: Boran, Mihaela MD~

MR#: M000580372
Acct: V00009773102
ADM/Service Date: 04/24/20

cc: ~

General Information

Service Date: 04/24/20

Start Time: 11:14

History of Present Illness: Patient last seen on: Pt reported that she is doing well on the gabapentin. She plans to start Accutane soon and is going to check with her dermatologist to see if she can stay on it.

Substance Use: Denied recent use. Last used 3/1

PCP: NEIL SMERLING

Review of Systems

Changes in physical health: Denied

Patient Pregnant?: No

Birth Control: Microgestin FE

Gait: Steady

Sleep: pretty good

Appetite: good

Energy: fluctuates, overall decent

IADLs/ADLs: WNL

Current/Past History

All Active Problems (Updated 04/07/20 @ 08:48 by Brian Ullman, APRN)

Bipolar disorder, current episode depressed, mild or moderate severity, unspecified (Acute)

Opioid dependence, uncomplicated (Acute)

Major depressive disorder, single episode, unspecified (Acute)

Medications

Current psychiatric medications: gabapentin 300mg tid

Home Medications

Medication	Instructions	Recorded	Confirmed	Type
gabapentin		04/14/20		History
norethindrone-e.estradiol-Iron [Microgestin FE 1/20 (28)]	tab	04/14/20		History

Reported side effects: denied

Allergies: seasonal

Health Information Management 0424-00181

GRF

Patient name: Smith,Sara
Account #: V00009773102

2

Education, risks, benefits, and side effects of medications reviewed/discussed with patient?: Yes
Client is agreeable to taking their medications as directed?: Yes
Past medication trials: abilify, zoloft, trazodone, tried seroquel.

Mental Status Exam

Orientation: A + O x 4
Appearance: Adequately groomed, Well groomed, Dressed appropriate to weather and Casually dressed
Mood: depends on the day
Affect: Appropriate, Calm and Mood Congruent
Depression (0 - 10, 10 worst): 3/10
Anxiety (0 - 10, 10 worst): 2/10
Suicidal Ideation: Absent
Homicidal Ideation: Absent
Hopeless: Absent
Helpless: Absent
Speech: Normal cadence and tone, Spontaneous and Articulate
Eye Contact: Maintains Eye Contact
Thought Process: Intact, Organized, Rational and Goal Oriented
Thought Content: Present Other (denied)
Judgement: Good
Insight: Good
Memory: Other (denied)

Additional Treatment Plan

Tolerating medications: Tolerating meds well. Overall Is doing pretty well. Is handling the COVID-19 crisis well.
Changes in substance use: Denied recent cravings.
Response to treatment: Responding well.
Provider statement: I spent > 50% of this visit in counseling and coordination of care.
Continue IOP
Continue current meds
Call 211, 911, or go to the ED if having SI or HI.

CPMRS: Yes

Documented By: Harrison,Lisa G. APRN~
Signed By: <Electronically signed by Lisa G. Harrison APRN>

04/24/20 1114
04/24/20 1122

***Live* Griffin Hospital**

Smith,Sara Female DOB: 05/23/1991 MedRec# M000580372

04/30/20 11:49 - IOP Progress Note by Pacific T. Giordano, LCSW

Acct Num: V00009773102 DOB: 05/23/1991 Patient Age: 28

IOP Progress Note

IOP Psych Progress Note

Start: 04/30/20 11:43

Freq:

Status: Active

Protocol:

Document 04/30/20 11:47 PGIORDANO (Rec: 04/30/20 11:49 PGIORDANO Desktop)

IOP Progress Note

Encounter

Encounter Type

Individual

Patient consents to telehealth

Location of Clinician/Provider

IOP

Location of Patient

IOP

Date of Service

04/30/20

Start Time

11:00

End Time

11:30

Therapeutic Intervention(s) Utilized

Clinician used Motivational Interviewing and CBT to identify patient's stage of change as the action/maintenance stage. Discussed progress made on treatment plan goals and objectives. Developed treatment plan update to achieve the maintenance stage by creating a daily routine to stay sober upon completion of IOP.

Symptom Description and Subjective Report

Patient presented as alert, calm, cooperative and orientated x3 with congruent mood and affect. Patient reports anxiety of 4 and depression of 4 on a scale of 0 to 10, 10 being most severe. Patient denies SI/HI/AH/VH.

Progress toward Treatment Goals

Patient has continued to remain sober throughout the course of IOP as evidenced by self-report and negative (-) UDS and breathalyzer results. Patient shares openly in group and offers supportive feedback to other group members. Patient identifies her pending DCF investigation regarding her nursing license and her relationship with her

ex-husband as her primary stressors. She spoke of working with her lawyer on her nursing license and being frustrated that COVID-19 has delayed her case from proceeding. Patient states she has been sending applying for jobs not needing a nursing license, taking EMT classes online and working on establishing healthy boundaries with her ex-husband. Patient states she is currently in a relationship with a new person who is sober in recovery and respectful of her. Patient states that her past trauma and low self-esteem as a result have her feel she is not worthy of a healthy relationship. Patient states she misses having a routine of working and being healthy going to the gym. Discussed being creative about other ways to exercise and be active. Patient reports continuing to do online Zoom AA meetings as a community support. Patient will consider seeing an individual trauma focused therapist to address symptoms of trauma and low self-esteem. Continue to engage in IOP 3x per week.

Plan

Mental Status Exam

Appearance Dress/Hygiene
 Speech
 Mood/Affect
 Thought Content
 Hallucination Type
 Current suicidal ideation
 Current Suicidal Ideation
 Current homicidal ideation
 Current Homicidal Ideation
 Neurovegetative Symptoms
 Sleep- number of hours per day
 Energy Level
 Difficulty Concentrating
 Insight
 Judgement

Groomed
 WNL
 Appropriate
 WNL
 None
 No
 Denies Intent/Plan
 No
 Denies Intent/Plan
 6-8 hours
 Not Enough
 A little bit
 Good
 Good

** Electronically signed by Pacific T. Giordano, LCSW on 04/30/20 11:49 **
 Initialized on 04/30/20 11:49 - END OF NOTE

04/30/20 11:46 - IOP Treatment Plan Update by Pacific T. Giordano, LCSW

Acct Num: V00009773102 DOB: 05/23/1991 Patient Age: 28

Acute/Chronic Problems

Bipolar disorder, current episode depressed, mild or moderate severity, unspecified (Acute)

Opioid dependence, uncomplicated (Acute)

Major depressive disorder, single episode, unspecified (Acute)

IOP Treatment Plan Update

IOP Treatment Plan Update

Freq:

Start: 04/30/20 11:43

Protocol:

Status: Active

Document 04/30/20 11:43 PGIORDANO (Rec: 04/30/20 11:46 PGIORDANO Desktop)

Treatment Plan Update

Treatment Plan

Service Date

04/30/20

Summary of progress

Patient has continued to remain sober throughout the course of IOP as evidenced by self-report and negative (-) UDS and breathalyzer results. Patient shares openly in group and offers supportive feedback to other group members. Patient identifies her pending DCF investigation regarding her nursing license and her relationship with her ex-husband as her primary stressors. She spoke of working with her lawyer on her nursing license and being frustrated that COVID-19 has delayed her case from proceeding. Patient states she has been sending applying for jobs not needing a nursing license, taking EMT classes online and working on establishing healthy boundaries with her ex-husband. Patient states she is currently in a relationship with a new person who is sober in recovery and respectful of her. Patient states that her past trauma and low self-esteem as a result have her feel she is not worthy of a healthy relationship. Patient states she misses having a routine of working and being healthy going to the gym. Discussed being creative about other ways to exercise and be active. Patient reports

continuing to do online Zoom AA meetings as a community support. Patient will consider seeing an individual trauma focused therapist to address symptoms of trauma and low self-esteem.

Treatment Justifications

Improve/control psychiatric symptoms to prevent relapse/deterioration,Improve/maintain patients max level of indiv. and/or commun. function

Areas of Focus

Area of Focus #1

F11.20 Opioid dependence, uncomplicated

Goal #1 (quote)

"To stay sober and set healthy boundaries with my ex-husband ."

Objective #1

Query Text:Objective should be expressed in measurable terms, steps to achieve the goal and measurable target date

1. Sara will remain clean and sober as evidenced by self-report and negative randomized UDS/breathalyzer tests. 5/30/2020

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3. Sara will attend at least two (2) self-help meetings (AA /NA/SMART Recovery) for additional sober support. 5/30/2020

4. Sara will identify and process at least 2 additional motivating factors for her sobriety. 5/30/2020

5. Sara will "find work again." 5/30/2020

Therapeutic Interventions #1 (include frequency and staff)

Individual Therapy-PTG/bi weekly
Group therapy-clinical staff-3 days/week, 3 hrs/day
Relapse prevention-clinical staff-3 days/week, 3 hrs/day
Psycho-education- clinical staff-3 days/week, 3 hrs/day

Area of Focus #2

F32.9 Major Depressive Disorder, single episode, unspecified

Goal #2 (quote)

"Will continue to stay engaged in 12 Step program."

Objective #2

Query Text:Objective should be expressed in measurable terms, steps to achieve the goal and measurable target date

1. Sara will report overall improved mood during check in groups and will report use of at least three effective coping skills for the management of mood. 5/30/2020

2. Sara will learn to

implement calming coping strategies to manage emotional reactions. 5/30/2020

3. Sara will identify, challenge, and replace fearful self-talk with reality based self-talk. 5/30/2020

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Individual therapy-bi-weekly-PTG

Group therapy-3 days/week for 3 hrs/day-clinical staff

Medication Management-bi weekly-MD/APRN

Coping skills development-clinical staff-3 days/week, 3 hours/day

Diagnosis
Medical Problems
Stressors

Migraines, Kidney Stones
Marital discord/relationship issues, Involvement in legal system, Other, Employment problem, Primary support problem, Educational problem

Patient Signature: _____
Date: _____

Physician Signature: _____
Date: _____

** Electronically signed by Pacific T. Giordano, LCSW on 04/30/20 11:46 **
Initialized on 04/30/20 11:46 - END OF NOTE

**STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING**

Nichole Holiday
640 Country Road
Woodstock, CT 06281

CMRRR# 91 7199 9991 7038 3995 5731
First Class Mail
and Via EMAIL (nicolemarieholiday@gmail.com)

RE: Nichole Holiday, RN, APRN - Petition Nos. 2019-445; 2019-458

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 March 18, 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:

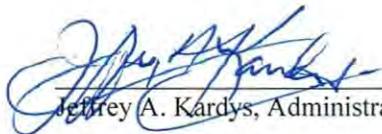
Department of Public Health
Public Health Hearing Office
410 Capitol Avenue, MS#13PHO
P. O. Box 340308
Hartford CT 06134-0308

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 20th day of FEBRUARY, 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
Matthew Antonetti, Principal Attorney, Office of Legal Compliance
Brittany Allen, Staff Attorney, Office of Legal Compliance

The Department of Public Health is an equal opportunity provider and employer.

*If you require aid/accommodation to participate fully and fairly,
please contact the Public Health Hearing Office at 860-509-7566.*

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Nicole Holiday, R.N., A.P.R.N.

Petition No. 2019-445

Petition No. 2019-458

STATEMENT OF CHARGES

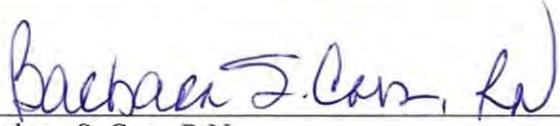
Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Nicole Holiday:

1. Nicole Holiday of Woodstock, Connecticut (hereinafter "respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut registered nursing license number 105959 and advanced practice registered nursing license number 005964.
2. Respondent suffers from opioid use disorder.
3. In or around June 2017, respondent fraudulently used the name and DEA registration number of another nurse to call in prescriptions for herself and/or her husband.
4. On or about July 18, 2017, as a result of an investigation by the Drug Control Division of the Department of Consumer Protection (hereinafter "Drug Control"), respondent voluntarily surrendered her controlled substance registration, CSP.58835 and DEA registration, MD3349520.
5. Respondent's abuse and/or excessive use of opioids does, and/or may, affect her ability to practice nursing.
6. 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), §20-99(b)(5), and/or §20-99(b)(6).

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 registered nursing and/or advanced practice registered nursing licenses of Nicole Holiday as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 12th day of December 2019.



Barbara S. Cass, R.N.
Branch 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

March 13, 2020

Nicole Holiday
640 Country Road
Woodstock, CT 06281

First Class Mail
and **VIA EMAIL (nicolemarieholiday@gmail.com)**

Brittany Allen, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Nicole Holiday, RN, APRN - Petition Nos. 2019-445, 2019-458

REVISED NOTICE OF HEARING

The location for the hearing in the referenced matter scheduled for **Wednesday, March 18, 2020** has changed.

The hearing will held in at the Department of Public Health, 410 Capitol Avenue, Hartford, Connecticut, in the **third floor Hearing Room**, beginning at 9:00 a.m.

FOR: BOARD OF EXAMINERS FOR NURSING

BY:

Handwritten signature of Jeffrey A. Kardys in blue ink.

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
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Affirmative Action/Equal Opportunity Employer



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 16, 2020

Nicole Holiday
640 Country Road
Woodstock, CT 06281

VIA EMAIL (nicolemarieholiday@gmail.com)

Brittany Allen, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Nicole Holiday, RN, APRN - Petition Nos. 2019-445, 2019-458

RULING ON REQUEST FOR CONTINUANCE

On March 16, 2020, the Department of Public Health filed a request for continuance of the hearing in the above-referenced matter scheduled for March 18, 2020.

The Department's request is GRANTED.

Notification of a new hearing date will be sent when determined.

FOR: BOARD OF EXAMINERS FOR NURSING

BY: 

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
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STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Deidre S. Gifford, MD, MPH
Acting Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

June 8, 2020

Nicole Holiday
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VIA EMAIL (nicolemarieholiday@gmail.com)

Brittany Allen, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Nicole Holiday, RN, APRN - Petition Nos. 2019-445, 2019-458

REVISED NOTICE OF HEARING

The hearing in the above referenced matter, is rescheduled to June 17, 2020.

The hearing will be held by video conference during the meeting of the Board of Examiners for Nursing.

FOR: BOARD OF EXAMINERS FOR NURSING

BY: /s/ Jeffrey A. Kardys

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
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