

**AGENDA**  
**BOARD OF EXAMINERS FOR NURSING**  
Department of Public Health  
410 Capitol Avenue, Hartford, CT  
Third Floor – Hearing Room  
April 15, 2020 - 8:30 AM

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

**MINUTES**

March 18, 2020

**SCOPE OF PRACTICE INQUIRIES**

*February/March 2020*

**SCHOOL ISSUES**

- *COVID-19*
  - A. *Connecticut League for Nurses – Request for expansion of alternate clinical placement experiences*
  - B. *Lincoln Technical Institute – Request to use virtual clinical experiences.*
- *Porter & Chester Institute*

**MEMORANDUM OF DECISION**

- *Brian Gross, RN - Petition No. 2019-536*
- *Laura Kisatsky, RN - Petition No. 2018-1416*
- *Danielle Miranda, RN - Petition No. 2019-87*
- *Charlene Zikaras, RN - Petition No. 2019-522*

**MOTIONS FOR SUMMARY SUSPENSION**

- *Heather Spaulding, RN*      *Petition No: 2019-1224*      *Staff Attorney Leslie Scoville*

**CONSENT ORDERS**

- *Carissa Kelly, RN, APRN*      *Petition No. 2019-1025*      *Staff Attorney Joelle Newton*
- *Kimberly Smith, LPN*      *Petition No: 2019-592*      *Staff Attorney Joelle Newton*
- *Milagros, Narido, RN*      *Petition No: 2019-1055*      *Staff Attorney Joelle Newton*

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

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

The **Board of Examiners for Nursing** held a meeting on March 18, 2020 at the Department of Public Health 410 Capitol Avenue, Hartford, Connecticut in the third floor hearing room.

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**BOARD MEMBERS PRESENT:** Patricia C. Bouffard, RN, Chair  
Jason Blando, Public Member – via telephone  
Elizaida Delgado, LPN – via telephone  
Mary Dietmann, RN – via telephone  
Lisa S. Freeman, Public Member – via telephone  
Jennifer Long, APRN – via telephone  
Geraldine Marrocco, RN – via telephone  
Gina M. Reiners, RN – via telephone

**BOARD MEMBERS ABSENT:** Mary M. Brown, RN

**ALSO PRESENT:** Stacy Schulman, Legal Counsel to the Board, DPH  
Janet Brancifort, Public Health Services Manager, DPH  
Dana Dalton, RN, Supervising Nurse Consultant, DPH  
Helen Smith, RN, Nurse Consultant, DPH  
Brittany Allen, Staff Attorney, DPH – via telephone  
Linda Fazzina, Staff Attorney, DPH  
Joelle Newton, Staff Attorney, DPH – via telephone  
Leslie Scoville, Staff Attorney, DPH  
Agnieszka Salek, Hearings Liaison, DPH – via telephone

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Chair Patricia Bouffard called the meeting to order at 8:32 a.m.

**CHAIR UPDATES**

Nothing to Report

**OPEN FORUM**

Bianca Simonera, a former student at the Porter & Chester Waterbury campus addressed the Board as to her dismissal from Porter & Chester.  
Debra Hessell and Philp Krebs were present by telephone from Porter & Chester. They will communicate further with Ms. Simonera.

**NATIONAL COUNCIL STATE BOARDS OF NURSING**

Geraldine Marrocco, Mary Dietmann and Chair Bouffard participated in a Nurse Education Committee webinar.

**MINUTES**

Gina M. Reiners made a motion, seconded by Mary Dietmann, to approve the minutes from February 19, 2020 as edited. The motion passed with all in favor except Elizaida Delgado who abstained.

**SCHOOL ISSUES**

**COVID-19**

The Board had discussion with representatives of Connecticut registered nurse and practical nurse programs regarding issues resulting from restrictions related to COVID-19 and how the restrictions will impact clinical training for nursing students.

Geraldine Marrocco made a motion, seconded by Mary Dietmann that in accordance with section 20-90-47(d) of the regulations for nursing education programs, that the Board endorses and approves alternative methods for programs to provide flexibility to senior nursing students to meet clinical requirements, as provided in section 20-90-52(c), for respective program graduation and NCLEX -RN eligibility. The motion passed unanimously.

Gina Reiners made a motion, seconded by Geraldine Marrocco, that the Board authorizes the approval of major curriculum changes, as set forth in section 20-90-47(d) of the regulations for nursing education programs, prior to a comprehensive plan being presented to the Board for review prior to the implementation of changes. The motion passed unanimously.

Sacred Heart University

May Donius was present by telephone on behalf of Sacred Heart University.

Helen Smith, RN reported on a 03/03/2020 a visit to Sacred Heart University College of Nursing subsequent to the approval of the Second Degree Accelerated Bachelor of Science in Nursing Program.

Geraldine Marrocco made a motion seconded by Gina Reiners to approve the results from the site visit.

The motion passed with all in favor except Mary Dietmann and Jason Blando who abstained.

Porter & Chester Institute – Plan of Correction – Monthly update

Philip Krebs, Debra Hessel and Joan Feldman, Esq. were present by telephone on behalf of Porter & Chester.

Helen Smith, RN reported on site visits to Porter & Chester campuses and the monthly plan of correction update. Mr. Krebs expressed concerns with the report by Ms. Smith.

The Board requested that Porter & Chester provide a detailed written response to the report by Ms. Smith.

**MEMORANDUM OF DECISION**

Jennifer Rivers-Biltcliffe, LPN - Petition No. 2017-1043

Gina Reiner made a motion, seconded by Mary Dietmann, to affirm the Board's decision placing Ms. Rivers-Biltcliff's license on probation for a period of one year. The motion passed with all in favor except Elizaida Delgado who abstained. Chair Bouffard signed the Order.

Greg Ulrich, RN – Petition No.2018-255

Gina Reiner made a motion, seconded by Lisa Freeman, to affirm the Board's decision dismissing the charges against Mr. Ulrich. The motion passed unanimously. Chair Bouffard signed the Order.

**LICENSE REINSTATEMENT REQUEST**

Margaret Weiss, RN

Dana Dalton, Supervising Nurse Consultant, DPH, presented a license reinstatement request for Margaret Weiss, RN.

Following review, the Board concurred with the DPH recommendation that Ms. Weiss' license be reinstated to probation for a period of four years with conditions including drug/alcohol screening, therapy and employer evaluations, and attendance at AA/NA meetings, completion of a refresher program and passing the NCLEX examination.

**MOTIONS FOR SUMMARY SUSPENSION**

Karina Francis, RN - Petition No. 2020-157

Staff Attorney Brittany Allen presented the Board with a Motion for Summary Suspension for Karina Francis. Ms. Francis was not present and was not represented.

Mary Dietmann moved to grant the Department's Motion for Summary Suspension in that respondent's continued practice as a nurse is a clear and immediate danger to public health, safety and welfare. The motion was seconded by Gina Reiners and passed unanimously. Chair Bouffard signed the Summary Suspension Order. A hearing will be scheduled for April 15, 2020.

Colleen Gallagher, LPN - Petition No. 2020-76

Staff Attorney Linda Fazzina presented the Board with a Motion for Summary Suspension for Colleen Gallagher. Ms. Gallagher was not present and was not represented.

Geraldine Marrocco moved to grant the Department's Motion for Summary Suspension in that respondent's continued practice as a nurse is a clear and immediate danger to public health, safety and welfare. The motion was seconded by Mary Dietmann and passed unanimously. Chair Bouffard signed the Summary Suspension Order. A hearing will be scheduled for April 15, 2020.

Vanessa Clough, RN - Petition No: 2020 111

Staff Attorney Leslie Scoville presented the Board with a Motion to Withdraw Statement of Charges in Lieu of the Motion for Summary Suspension for Vanessa Clough. Ms. Clough was not present and was not represented.

Ms. Clough surrendered her license on March 16, 2020. Geraldine Marrocco moved to grant the Department's Motion to Withdraw Statement of Charges. The motion was seconded by Mary Dietmann and passed unanimously. Chair Bouffard signed the Motion to Withdraw Statement of Charges-

**CONSENT ORDERS**

Dianne Mealy, RN - Petition No: 2019-835

Joelle Newton, Staff Attorney, Department of Public Health presented a Consent Order in the matter of Dianne Mealy, RN.

Ms. Mealy was not present and was not represented by counsel.

Gina Reiners moved and Mary Dietmann seconded, to approve the Consent Order. The motion passed. Chair Bouffard opposed. Chair Bouffard signed the Order which imposes a reprimand and probation for a period of six months.

Tabitha Banker, LPN - Petition No: 2018-557

Leslie Scoville, Staff Attorney, Department of Public Health presented a Consent Order in the matter of Tabatha Banker, LPN.

Ms. Banker was present by telephone with Attorney Cody Guarnieri.

This matter will be added to the April agenda after edits are made.

Jill Cavanaugh, RN - Petition No: 2018-443

Joelle Newton, Staff Attorney, Department of Public Health presented a Consent Order in the matter of Jill Cavanaugh, RN.

Ms. Cavanaugh and her attorney were not present.

Gina Reiners moved, and Lisa Freeman seconded, to approve the Consent Order. The motion passed unanimously. Chair Bouffard signed the Order which imposes a reprimand and probation for a period of one year.

Susan Romatzick, RN - Petition No. 2019-628

Linda Fazzina, Staff Attorney, Department of Public Health presented a Consent Order in the matter of Susan Romatzick, RN. Ms. Romatzick was present by telephone.

Geraldine Marrocco moved, and Mary Dietmann seconded, to approve the Consent Order. The motion passed unanimously. Chair Bouffard signed the Order which imposes a reprimand and probation for a period of six months

William Meister, RN - Petition No: 2018-733

Joelle Newton, Staff Attorney, Department of Public Health presented a Consent Order in the matter of William Meister, RN. Attorney John Denver was present by telephone on behalf of Mr. Meister.

Geraldine Marrocco moved, and Jennifer Long seconded, to approve the Consent Order. The motion passed. Chair Bouffard signed the Order which imposes probation for a period of four years.

**HEARINGS**

Judith Cullen, RN - Petition No. 2016- 1160

Joelle Newton, Staff Attorney was present by telephone for the Department of Public Health.

Judith Cullen was present by telephone but was not represented.

Gina M. Reiners made a motion, seconded by Jennifer Long, to grant Ms. Cullen's request to modify the frequency of urine screens required by an April 17, 2017 Memorandum of Decision

The motion was made on the record and passed unanimously.

**ADJOURNMENT**

It was the unanimous decision of the Board Members present to adjourn this meeting at 11:56 a.m.

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

## **BOEN meeting 04/15/2020**

### **Connecticut League for Nursing (CLN):**

1. Requesting expansion of the alternative clinical placement experiences to apply to the current junior and sophomore students.
2. Data from the annual RN & LPN pre-licensure education programs.

Please note: On 03/23/2020 the Department e-mailed each BOEN member the "Flexible education resources document" provided by Dr. Kazer as requested by the BOEN during the last meeting

### **Lincoln Technical Institute (LTI):**

Request for use of virtual clinical experiences. Provided Attachment A: Contingency Plan.

### **Porter & Chester Institute (PCI):**

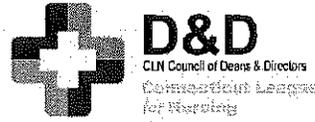
The Department is providing:

1. Letter from PCI, dated 03/16/2020, that as of 03/17/2020 all didactic course material will be offered in a blended or hybrid method (Canvas).
2. The resume for the consultant that was hired.

As of 04/06/2020: PCI had not provided any additional information to the Department.



**Connecticut League  
for Nursing**



## Talking Points from the CLN Council of Deans & Directors to the CT SBOEN

### **Requesting Expansion of the Student Nurse Alternative Clinical Placement Experiences Vote taken on March 18, 2020 to Apply to the current Junior and Sophomore Students Enrolled in RN Programs**

#### **CT SBOEN Meeting Scheduled April 15, 2020**

Members of the CLN Council of Deans & Directors Workgroup: Audrey Beauvais, Janice Watts, Dawn Bunting, Constance Hotchkiss, Jeanette Lupinacci, and Pam Forte

- We appreciate the CT Board of Examiners for Nursing passing the following motion on March 18, 2020:

*The BOEN supports RN educational programs in good standing to exercise maximum flexibility in using creative clinical education methods to meet program outcomes of students approaching licensure requirements, throughout the COVID-19 Pandemic.*

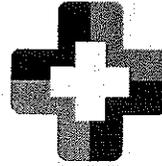
- We are back before you as the motion above addressed the RN educational students approaching licensure, but it does not address the other students in our programs.
- Given that clinical placements are challenging under the best of circumstances, our clinical partners have expressed that they cannot support us in making up the clinical hours missed during the COVID-19 Pandemic.
- Other states such as Virginia and Texas have waived the minimum hours of direct patient care and simulation in RN educational programs.
- RN educational programs across the state have developed robust alternative clinical experiences that will allow student to achieve their learning outcomes. Alternative clinical experiences will be driven by specific learning outcomes and will meet the intent of the accrediting standards from CCNE and ACEN that focus on expectations for the curriculum of any pre-licensure program. We have exemplars to share the depth of experiences we are providing for our students. In addition, these students will not be graduating in the next several months, which will allow faculty to ensure that they meet the clinical competencies and program outcomes prior to graduation.
- As such, we are requesting you consider the following motion:

*The CT BOEN accepts all clinical education methods that were implemented throughout the COVID-19 Pandemic in lieu of direct patient care for RN educational programs in good standing.*

Please contact: Marcia B. Proto, M.Ed, CAS, Executive Director, CT League for Nursing with your decision on the above Motion. [Marcia@CTLLeagueForNursing.org](mailto:Marcia@CTLLeagueForNursing.org) or 203-494-1121.



**Connecticut League  
for Nursing**



**D&D**  
CLN Council of Deans & Directors  
Connecticut League  
for Nursing

**March 27, 2020**

## **Collective Action Statement on Behalf of the CLN Council of Deans & Directors to Support Alternative Clinical Experiences**

In the face of the current COVID 19 pandemic, as representatives of the healthcare facilities providing clinical sites to the state's pre-licensure nursing programs, we offer this document as a statement of our support to the nursing programs of the State of Connecticut.

We recognize that each of our academic partners have been placed in the position to provide alternative clinical experiences to their students during this time of crisis. We acknowledge that our inability to allow students in our institutions has affected our academic partners. However, we are confident that the nursing programs in our state will maintain their standards of educational rigor and that they will be able to continue to prepare their students to meet the entry level competencies that each of us expect in our healthcare institutions when they return to their campuses and normal clinical and classroom schedules.

Furthermore, we sincerely hope that the Board of Examiners of Nursing continues to support the schools of nursing in all of their efforts to focus on enriching our future workforce with their graduates.

\_\_\_\_\_ Yes, I endorse this Collective Action Statement

For more information, please contact:

Marcia B. Proto, M.Ed, CAS, Executive Director for the Connecticut League for Nursing  
110 Washington Avenue, lower level, North Haven, CT 06473  
203-494-1121 or [Marcia@CTLeagueForNursing.org](mailto:Marcia@CTLeagueForNursing.org)

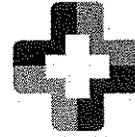
Collection Action Statement-Support Alternative Clinical Experiences

Rev. 4-1-2020

First Name	Last Name	Job Title	Company Name	email	Yes/No
Denise	Anderson	VP Nursing/CNO	Hospital for Special Care	danderson@hfsc.org	Yes
Barbara	Aronson	Professor	SCSU	aronsonb1@southernct.edu	Yes
Karen	Breda	Faculty	University of Hartford	breda@hartford.edu	Yes
Deborah	Chyun	Professor and Dean	University of Connecticut	deborah.chyun@uconn.edu	Yes
Holly	DeFeo	Oncology Nurse Educator	The Hospital of Central Connecticut	Holly.DeFeo@hhchealth.org	Yes
Mary Alice	Donius	Dean, Davis & Henley College of Nursing	Sacred Heart University	doniusm@sacredheart.edu	Yes
Patricia	Duclos-Miller	Professional Development specialist	Bristol Hospital	Pduclos@bristolhospital.org	Yes
Sally	Gerard	Associate Professor	Fairfield University	sgerard@fairfield.edu	Yes
Cheryl	Green	Assistant Professor	SCSU	cagreen2271@sbcglobal.net	Yes
Nancy	LaMonica		Bristol Hospital	Nlamonic@bristolhospital.org	Yes
Melanie	Mordasky	Perioperative Services Educator	ECHN	mmordasky@echn.org	Yes
Dawn	Nair	Interim Director	University of Bridgeport	dawnnair@bridgeport.edu	Yes
Carol	Papp	Dean, College of Health Sciences	Univesityof Bridgeport	capapp@bridgeport.edu	Yes
Carmen	Portillo	Executive Deputy Dean	Yale School of Nursing	carmen.portillo@yale.edu	Yes
Marcia	Proto	Executive Director	CT League for Nursing	marcia@ctleaguefornursing.org	Yes
Kimberlee	Richard	VP/CNO	St. Francis Hospital and Medical Center	kerichar@trinityhealthofne.org	Yes
Gina	StJean	Director of Nursing	Backus Hospital	Gina.st.jean@hhchealth.org	Yes
Maria	Tackett	Nursing Director	Hartford Hospital	maria.tackett@hhchealth.org	Yes
Anne	Vilhotti	Director of Nursing Innovation	Charlotte Hungerford Hospital	anne.vilhotti@hhchealth.org	Yes
Kristin	Waterman	Manager, Professional Development & Magnet	Bristol Hospital	kwaterma@bristolhospital.org	Yes
Diane	Wilson	Nurse Educator	Hartford Hospital	dwilsonmsn@gmail.com	Yes



**Connecticut League  
for Nursing**



**D&D**  
CLN Council of Deans & Directors  
Connecticut League  
for Nursing

## **PRESS RELEASE: April 3, 2020**

For immediate release, for more information contact:

**Meredith Kazer @ [mkazer@fairfield.edu](mailto:mkazer@fairfield.edu) Janice Watts @ [JWatts@goodwin.edu](mailto:JWatts@goodwin.edu)**

OR **Marcia Proto [marcia@ctleaguefornursing.org](mailto:marcia@ctleaguefornursing.org)**

### **Connecticut College and University Nursing Leaders Support a Safe and Robust Nursing Workforce during the COVID-9 Crisis and its Aftermath**

The Connecticut League for Nursing's Council of Deans & Directors is a cohesive group of leaders representing all twenty-three nursing programs throughout the state. The Council has been functioning to promote the needs of the nursing profession throughout the State of Connecticut, and meets regularly to address the impact of the COVID-19 Crisis on the nursing profession, the healthcare facilities with whom we partner, and the patients and families whom we serve.

COVID-19 is a virus affecting the entire world and to date thousands of people in the U.S. have tested positive for the disease. It is anticipated that many more will be affected in the near future due to very high transmission rates. The U.S. Center for Disease Control (CDC) anticipates an overabundance of patients inundating hospitals and possibly overwhelming the entire U.S. healthcare system. This pandemic has placed a significant and urgent demand on the nursing workforce with more than 1000 retired nurses coming back to staff the front lines in Connecticut.

Simultaneously, the pandemic has affected pre-licensure RN and PN/VN nursing students across the state. As expert nurse educators and administrators, we understand the urgent demand for a higher number of nurses to provide nursing care to COVID infected patients and to provide relief for our nursing partners but not at the risk of compromising preclicensure nursing students meeting program requirements and the safety for patients. The Council is working aggressively to ensure all nursing students are prepared with the necessary competencies at the time of graduation, and is actively developing and implementing models to support students' transition to practice. The Council has compiled best-practices, virtual experiences, and simulations that have been distributed to all nursing faculty in the State of Connecticut. We are working closely with the Connecticut State Board of Examiners in Nursing to ensure that program objectives and outcomes are met at the end of the final year of study to facilitate program completion and timely licensure.

The Council understands the important role that nursing students may serve as Student Nurse Technicians or Nursing Assistants within the workforce, and supports using educationally sound approaches to the participation of student nurses in these roles. Student and faculty participation in this pandemic is voluntary and must comply with any additional requirements mandated in state emergency response provisions or through existing Occupational Safety and Health Administration (OSHA) requirements. We further support that the safety for all front-line providers of services across multiple points of care must be safeguarded through appropriate and prevailing infection control practices and personal protective equipment (PPE) availability and use.

RW

2020 CT Registered Nurse (RN) Pre-Licensure Education Programs- Statewide Student Statistics Report for CT SBEN  
 Student Data Collected- Calendar Year 2019

School/University	Degree/Program	New Student Seat Capacity	Qualified Applicants	Total Admitted	Waitlisted	Applicants Accepted But Did Not Enroll	New Enrollees	New Cohorts	LPN Enrollees	Graduated	Total Student Enrollees	Withdrawn	Attrition Rate	Females	Males
Yale University	M	104	220	167	0	61	108	1	0	118	108	9	8%	96	12
Central Connecticut State University	B	70	81	70	11	4	67	1	0	37	173	3	2%	138	35
Naugatuck Valley Community College	AD	134	287	148	14	14	134	2	13	108	355	24	7%	301	54
Saint Vincent's College	AD	165	623	343	0	139	204	3	26	102	448	3	1%	393	55
Western CT State University	B	90	130	90	30	5	90	1	0	66	237	9	4%	201	36
Three Rivers Community College	AD	96	143	117	21	21	97	2	8	69	239	49	21%	221	18
Quinnipiac University	B	160	953	953	0	815	138	1	0	163	583	7	1%	542	41
QU, New Haven, CT	AC	60	300	127	0	54	63	1	0	59	63	1	2%	50	13
Capital Community College	AD	165	297	206	42	42	164	1	18	117	444	75	17%	371	73
Southern Connecticut State University	AC	36	106	43	7	7	36	1	0	34	40	0	0%	30	8
SCSU, New Haven, CT	B	80	162	80	0	2	78	1	0	56	186	4	2%	160	26
Sacred Heart University	B	280	2,308	898	0	609	289	1	0	97	690	37	4%	837	53
University of Saint Joseph	B	92	171	171	0	102	69	1	0	48	160	18	11%	156	4
USJ, West Hartford, CT	AC	38	48	48	0	15	33	1	0	32	65	2	3%	53	12
Gateway Community College	AD	96	262	119	23	23	96	1	10	99	383	32	8%	309	74
Fairfield University	B	175	1,073	605	0	448	157	1	0	136	576	23	4%	556	20
FU, Fairfield, CT	AC	60	153	89	0	35	54	1	0	46	113	1	1%	105	8
Northwestern CT Community College	AD	32	80	37	5	5	32	1	7	32	64	2	3%	56	8
Norwalk Community College	AD	81	173	100	19	18	73	1	7	65	243	38	16%	203	40
University of Hartford	B- NEW	100	100	611	0	511	100	1	0	0	100	7	7%	94	6
Goodwin University	AD	192	615	200	0	8	192	3	16	201	475	4	1%	406	69
GU, East Hartford, CT	AC- NEW	24	36	25	0	1	24	1	0	0	24	0	0%	20	4
University of Connecticut	B	125	2,123	519	0	390	129	1	0	125	458	19	4%	389	69
UConn CEIN - Avery Point (Groton)	AC	39	47	33	14	6	33	1	0	33	33	0	0%	26	7
UConn CEIN - Stamford	AC	33	41	27	14	6	27	1	0	27	27	0	0%	16	11
UConn CEIN - Storrs	AC	50	58	44	14	6	44	1	0	44	44	0	0%	38	6
UConn CEIN - Waterbury	AC	46	54	40	14	6	37	1	0	40	40	0	0%	30	7
University of Bridgeport- No yet Graduated First Class	B	90	167	94	4	4	90	1	2	0	246	1	0%	211	35
<b>Totals</b>		<b>2,713</b>	<b>10,811</b>	<b>6,004</b>	<b>232</b>	<b>3,357</b>	<b>2,658</b>	<b>34</b>	<b>107</b>	<b>1,954</b>	<b>6,817</b>	<b>368</b>	<b>5%</b>	<b>6,008</b>	<b>804</b>

B=Baccalaureate  
 AC=Accelerated 2nd degree program  
 AD=Associates degree  
 M=Masters Pre-Licensure  
 \*\*Attrition Rate = Withdrawn/Total Student Enrollees

Collected, Analyzed and Reported by the Connecticut League for Nursing (CLN) and CTData Collaborative  
 Marcia B. Proto, M.Ed, CAS, Executive Director  
 marcia@ctleaguefornursing.org / (203) 494.1121

LPN

2020 CT Licensed Practical Nurse (LPN) Pre-Licensure Education Programs- Statewide Student Statistics Report for CT SBEN  
 Student Data Collected- Calendar Year 2019

Organization	Program site	New Student Seat Capacity	Qualified Applicants	Total Admitted	Waitlisted	Applicants Accepted But Did Not Enroll	New Enrollees	Graduated	Total Student Enrollees	Withdrew	Attrition Rate	Females	Males
Porter & Chester	Stratford - Day	90	106	98	0	44	54	18	99	27	27%	88	11
	Stratford - Evening	60	63	60	0	27	33	11	57	12	21%	53	4
	Hamden - Day (was Branford)	90	97	76	0	8	68	23	114	26	23%	109	5
	Hamden - Evening (was Branford)	60	54	43	0	3	40	8	66	24	36%	64	2
	Waterbury - Day	120	169	150	0	67	83	48	173	56	32%	122	51
	Waterbury - Evening	60	94	77	0	30	47	20	101	27	27%	98	3
	Rocky Hill - Day	90	74	72	0	1	71	26	104	22	21%	95	9
	Rocky Hill - Evening	60	46	40	0	2	38	18	72	17	24%	68	4
	Enfield - Day	80	126	115	0	38	77	26	148	64	43%	136	12
Lincoln Technical Institute	Enfield - Evening	48	49	45	0	20	25	20	65	18	28%	57	8
	New Britain - Day	160	287	194	0	93	101	61	187	59	32%	162	25
	New Britain - Evening	160	128	184	0	82	42	19	101	14	14%	92	9
Stone Academy	Shelton - Day	160	206	134	0	72	135	108	276	19	7%	246	29
	Shelton - Evening	80	71	44	0	27	44	38	113	15	13%	105	8
	East Hartford - Day	180	205	205	0	64	14	84	235	39	17%	213	22
	East Hartford - Evening	180	166	166	0	36	130	62	310	48	15%	292	18
	West Haven - Day	180	198	198	0	51	146	18	234	28	12%	211	23
	West Haven - Evening	180	147	147	0	47	100	64	353	50	14%	342	11
	Waterbury - Day (New)	180	205	205	0	64	141	0	141	30	21%	125	16
Waterbury - Evening (New)	180	166	166	0	36	130	0	170	32	19%	161	9	
<b>Totals</b>		<b>2,398</b>	<b>2,657</b>	<b>2,419</b>	<b>0</b>	<b>812</b>	<b>1,519</b>	<b>672</b>	<b>3,119</b>	<b>627</b>	<b>20%</b>	<b>2,839</b>	<b>279</b>

Attrition Rate = Withdrew/Total Student Enrollees  
 Collected, Analyzed and Reported by the Connecticut League for Nursing (CLN) and CTData Collaborative  
 Marcia B. Proto, M.Ed, CAS, Executive Director  
 marcia@ctleaguefornursing.org / (203) 494.1121

**Smith, Helen**

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**From:** Deborah Little <DLittle@lincolntech.edu>  
**Sent:** Friday, April 3, 2020 4:30 PM  
**To:** Smith, Helen  
**Cc:** Patricia Delucia  
**Subject:** Lincoln Technical Institute  
**Attachments:** Lincoln Tech Letter - COVID Decision by the CT BOEN 04\_03\_2020.docx; Contingency Plan for BON Submission CT.docx

**Importance:** High

Hello Ms. Smith,

Lincoln Technical Institute would like to request a hearing with the Board of Examiners of Nursing (BOEN) or to be placed on the next BOEN meeting agenda. Our intent is to appeal the decision made by the BOEN during its meeting on March 18, 2020, regarding Practical Nursing program clinical requirements during the COVID healthcare crisis. Please find attached Lincoln Technical Institute's Contingency Plan for distance learning and cover letter to the BOEN. Thank you for your consideration and we look forward to hearing from you at your earliest convenience.

Thank you,  
Deborah

Deborah Little EdD, RN, CNE  
Corporate Assistant Dean of Nursing  
Phone: (973) 736-9340 Ext. 49928  
Email: dlittle@lincolntech.edu  
*Lincoln Educational Services, Corp.*  
*200 Executive Drive, Suite 340*  
*West Orange, New Jersey 07052*



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April 3, 2020

VIA E-MAIL ONLY

Patricia Bouffard DNS, RN  
Chairperson, Board of Examiners for Nursing  
Department of Public Health  
410 Capitol Avenue  
MS#13 PHO  
Box 340308  
Hartford, CT 06134-0308

RE: Lincoln Technical Institute – Request to Appeal Board Decision on Virtual Clinical

Dear Dr. Bouffard:

This correspondence serves as our institution's request to a hearing to appeal the decision made by the Board of Nurse Examiners ("BON" or "Board") during its meeting on March 18, 2020, to prohibit practical nursing programs from using virtual clinical experiences. As you know, the current healthcare crisis has required all institutions of higher education to reconsider how it delivers education to its students. In fact, our institutions have moved to online delivery as a means to protect our students and staff and help prevent the spread of the COVID-19 virus. Regrettably, the Board's decision is preventing over 70 students from our two Practical Nursing ("PN") programs from graduating in May and July. We are confident our Contingency Plan provided with this correspondence and our strong outcomes will document sufficient evidence to allow our institution to use a virtual modality for our clinical experience.

The Board's decision at its March 18, 2020, meeting has created both hardship on our institution and students, as well as clustered our programs with other institution's programs that are currently on conditional status. As you know, our PN programs have averaged over 90 percent first-time pass rate on the NCLEX, graduated approximately 500 students in the past two years, and placed over 85 percent of our graduates in practical nursing positions. Unfortunately, based on commentary during the Board's recent meeting, we feel as though the decision to deny virtual clinical was made, in part, to the outcomes of other PN programs. Thus, we hope the Board can evaluate Lincoln Tech PN programs on our own merits and ability to offer clinical in a virtual modality.

In terms of hardship on the students, we believe strongly these students are relevant to assist during the current pandemic. In fact, the Connecticut Office of Higher Education has requested information on whether our students would be willing to assist the Connecticut National Guard, if necessary. In addition, as you know, our students are generally placed in long-term care facilities that clearly are in dire need of additional staff members. Lincoln Tech will be able to graduate over 70 practical nurses that could provide vital healthcare services to this vulnerable population. If the Board does not overturn its recent decision, these students will be held in limbo until we can provide clinical sites for the students to complete their program requirements. Based on our assessment after discussion with our clinical partners, this delay could be several months and would leave critical healthcare workers on the sidelines of this fight versus this virus.

Finally, we are requesting this appeal particularly since nursing programs for registered nursing in Connecticut have been given unlimited use of the same resources to replace their clinical requirements. The national trend has been to use established resources such as those provided by Evolve Elsevier, FA

Davis, and Assessment Technologies Institute (ATI) for meeting clinical requirements and expediting graduation of students in their last semester of the nursing programs. To date, Lincoln Technical Institute has received approval by three nursing boards (New Jersey, Pennsylvania and Rhode Island) to allow utilization of established virtual clinical resources for replacement of in-person clinical experiences and subsequent on-time graduation of our students.

Enclosed with this correspondence you will find our proposed Contingency Plan to change the curriculum delivery method. As noted earlier, in response to the COVID-19 health emergency, we have transitioned from our current in-person classroom modality to online distance education effective March 16, 2020. The change to online learning consists of alternate teaching/learning strategies and web-based resources to ensure our students achieve established learning outcomes. Since the clinical affiliation agencies have cancelled student clinical rotations our plan is to use web-based learning activities, online skills modules, and virtual simulation that is available by our schools to be used to satisfy clinical requirements during this temporary period.

We hope you will take this correspondence and Contingency Plan into consideration and reverse your earlier decision. If you need any additional information, please feel free to contact me at [pdelucia@lincolntech.edu](mailto:pdelucia@lincolntech.edu).

Sincerely,

*Patricia DeLucia*

Patricia DeLucia MSN, RN  
[pdelucia@lincolntech.edu](mailto:pdelucia@lincolntech.edu)

*Deborah Little*

Deborah Little EdD, RN, CNE  
[dlittle@lincolntech.edu](mailto:dlittle@lincolntech.edu)

## ATTACHMENT A: Contingency Plan

### Transition to Online Distance Education for Curriculum Delivery

Item	Actions
<p>1. Faculty Orientation and Training</p>	<ul style="list-style-type: none"> <li>• March 9-12: Education Technology department designed course training to the CANVAS learning management system (LMS) for faculty. Corporate Education department developed Guide Sheet for available Online Resources. Coordinated messaging to Lincoln Tech faculty, staff, and students.</li> <li>• March 13: Education Technology scheduled <i>Distance Education Training with Canvas</i> sessions to occur from March 16 through March 20. A second set of training sessions scheduled to occur from March 23 through March 27 for select topics.</li> <li>• March 15: Skype meeting of Education Team for final preparations to transition to distance education.                         <ul style="list-style-type: none"> <li>• Instructions sheets and campus level training for tools and technologies: Lincoln email (webmail), Skype for phone conferencing, and Canvas LMS requirements for computer and Wi-Fi.</li> </ul> </li> <li>• March 16: School closed for <i>Faculty Development Day</i> <ul style="list-style-type: none"> <li>• Live training, online courses, and custom training available as needed.</li> <li>• All faculty required to complete 3 self-paced online course modules in Canvas Resources: Canvas orientation, distance learning with Canvas, and teaching online courses with Canvas.</li> <li>• All faculty required to attend an online interactive training session: 3 sessions scheduled daily for day and evening faculty; 1 afternoon and 1 evening sessions scheduled daily for open Q&amp;A and individualized assistance.</li> <li>• Identify faculty experts for support/planning/guidance/brainstorming</li> <li>• Instructional planning: course planning (individual or in teams), begin development of remote assignments, plan for remainder of course (overall and daily), review of Online Resources Guide Sheets, documentation of attendance, documentation of online learning activities</li> </ul> </li> </ul>

## ATTACHMENT A: Contingency Plan

<p>2. Student Orientation and Training</p>	<ul style="list-style-type: none"> <li>• March 9-12: Education Technology department designed course training to the CANVAS learning management system (LMS) for students. Coordinated messaging to Lincoln Tech faculty, staff, and students.</li> <li>• March 17-18: School closed and begin <i>Student Orientation and Transition to Online Distance Learning</i> <ul style="list-style-type: none"> <li>• Live training, online courses, and custom training provided as needed.</li> <li>• All students required to complete the self-paced online course module in Canvas Resources: Canvas Orientation Course</li> <li>• All students required to attend an online interactive training session:           <ul style="list-style-type: none"> <li>▪ Review of Canvas Student Guide</li> <li>▪ Student portal password</li> <li>▪ Messaging the instructor and checking the Inbox</li> <li>▪ Accessing uploaded files, PowerPoints, pdfs</li> <li>▪ CANVAS CONFERENCES for lectures (live or recorded teaching)</li> <li>▪ Submission of online assignments and grading criteria rubric</li> <li>▪ Shared video links or website links with corresponding assignments</li> <li>▪ Discussion threads and grading criteria rubric</li> <li>▪ Quizzes / Tests through Respondus lockdown browser</li> <li>▪ Viewing grades for online learning activities</li> <li>▪ CHAT feature</li> <li>▪ Canvas Resource Center</li> <li>▪ Canvas app for mobile phone</li> <li>▪ Who to contact for assistance during normal business and non-business hours; Canvas Support Hotline and reporting a problem</li> <li>▪ Important information regarding attendance for distance learning</li> </ul> </li> <li>• Students confirm functionality of their technology to engage in online distance learning           <ul style="list-style-type: none"> <li>▪ Technology equipment and support provided to students as needed</li> </ul> </li> </ul> </li> <li>• March 19: Students complete transition to online distance education</li> </ul>
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**ATTACHMENT A: Contingency Plan**

<p>3. Alternate Teaching/Learning Strategies</p>	<p>Some examples include but not limited to the following:</p> <ul style="list-style-type: none"> <li>• Synchronous lecture delivery</li> <li>• Recorded lectures with 14-day access</li> <li>• Online assignments to include:             <ul style="list-style-type: none"> <li>• Case studies with written 1-2 page paper and/or questions</li> <li>• YouTube video links with written 1-2 page paper and/or questions</li> <li>• Internet website links with written 1-2 page paper and/or questions</li> <li>• Podcast audio file links with written 1-2 page paper and/or questions</li> <li>• Online assignments graded with criteria-based rubrics</li> </ul> </li> <li>• Asynchronous discussion forums             <ul style="list-style-type: none"> <li>• Discussion threads: initial (original) post is a direct response to instructor’s question(s) and is due no later than Thursday at 11:59 pm of the current week. A second and third post will be a response (reply) to an initial comment posted by either another student or to an additional comment by the instructor. The reply posts are due no later than Sunday at 11:59 pm</li> <li>• Discussion threads graded with criteria-based rubrics.</li> </ul> </li> <li>• Textbook readings or peer-reviewed journal article readings completed as a pre-class assignment (flipped classroom concept) followed by quizzing for formative assessment and online discussion (BigBlueButton and Kahoot online programs to build custom quizzes or surveys)</li> <li>• Synchronous student-teacher video discussions through Canvas Conferencing</li> <li>• Chat Canvas course tool to create virtual office hours, conduct group discussions or study sessions.</li> </ul>
<p>4. Web-Based Resources for Didactic Content</p>	<ul style="list-style-type: none"> <li>• Davis Plus/Edge through FA Davis publishers             <ul style="list-style-type: none"> <li>• Student online resources:                 <ul style="list-style-type: none"> <li>▪ e-book with personalized quizzing</li> <li>▪ Interactive resources that interact with the textbook that include audio case studies and animations</li> <li>▪ Online references and bibliography</li> <li>▪ Chapter key points</li> </ul> </li> </ul> </li> </ul>

**ATTACHMENT A: Contingency Plan**

	<ul style="list-style-type: none"> <li>▪ Ethical consideration</li> <li>▪ Patient Teaching Guidelines</li> <li>• Faculty online resources:             <ul style="list-style-type: none"> <li>▪ e-book to create assignments and track student performance</li> <li>▪ Classroom and lecture planning resources</li> <li>▪ Online learning activities and assignment resources</li> <li>▪ Testing resources</li> </ul> </li> <li>• Faculty can adapt online formative assessments to meet the learning needs of the class. Faculty create a class and manage textbook chapter assessments through assignments created within the class and faculty can view student scores upon completion of the questions</li> <li>• Evolve through Elsevier publishers             <ul style="list-style-type: none"> <li>• Student online resources:                 <ul style="list-style-type: none"> <li>▪ Computer assisted instruction tutorials for select topics</li> <li>▪ Online bibliography and suggested readings that are chapter-based</li> <li>▪ Interactive learning activities and animations for select topics</li> </ul> </li> <li>• Faculty online resources:                 <ul style="list-style-type: none"> <li>▪ Chapter-based open book quizzes</li> <li>▪ Lesson plans adapted for online theory</li> </ul> </li> </ul> </li> <li>• Assessment Technologies Institute (ATI) – Comprehensive Assessment and Review Program (CARP)             <ul style="list-style-type: none"> <li>• Content Mastery Series Exams</li> <li>• Nursing Logic</li> <li>• Learning Systems</li> <li>• Critical Thinking</li> <li>• Comprehensive Predictor Assessments</li> <li>• Pharmacology and Dosage Calculation tutorials</li> </ul> </li> </ul>
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### ATTACHMENT A: Contingency Plan

	<ul style="list-style-type: none"> <li>• Assessment Technologies Institute (ATI) – Virtual ATI (VATI) NCLEX-PN Review             <ul style="list-style-type: none"> <li>• Students engage in Virtual ATI during their last term which is delivered as an individualized, self-paced module to identify learning gaps and reinforce knowledge in preparation for the NCLEX-PN licensing exam. Each student is assigned a Master’s or Doctoral prepared virtual teacher to coach the student in the VATI program progression.</li> </ul> </li>   <li>• Elsevier Adaptive Quizzing (EAQs) through Elsevier Evolve publishers             <ul style="list-style-type: none"> <li>• A formative assessment tool that provides personalized questions to help students study more effectively through individualized assessment with NCLEX-PN exam-style questions</li> <li>• Interactive adaptive quizzing are created by faculty for textbook chapter assessments</li> <li>• Faculty can select “study mode” to give instant feedback on questions to students</li> <li>• Faculty can select “exam mode” to allow students to review questions at the end of the assignment</li> <li>• Faculty can select quiz assignments to be graded or not graded for formative/summative assessment</li> <li>• Faculty select level of questions to build quiz assignments with advancing level of difficulty, beginning at level 1, progressing to level 2, and level 3 for mastery of questions.</li> <li>• At each level, the program continues to test item until student demonstrates achievement of learning</li> </ul> </li> </ul>
<p>5. Web-Based Resources for Clinical Content</p>	<ul style="list-style-type: none"> <li>• Assessment Technologies Institute (ATI) Skills Videos             <ul style="list-style-type: none"> <li>• Students take module <i>Pre-Test</i> for knowledge assessment</li> <li>• Student watch module-specific overview video and review module learning objectives</li> <li>• Students complete all sections of module <i>Lesson</i>:                 <ul style="list-style-type: none"> <li>▪ Terminology/Enunciator</li> <li>▪ Accepted Practices for equipment and skills procedure</li> <li>▪ Step-by-step video of the skills procedures</li> <li>▪ Evidence-based research studies related to the specific skills</li> <li>▪ Practice Challenges: case study and questions</li> </ul> </li> </ul> </li> </ul>

**ATTACHMENT A: Contingency Plan**

- Frequently asked questions related to the specific skills
  - Documentation and example nurse's notes
- Students take module Post-Test and are required to achieve a specific cut score
- Davis Plus Interactive Clinical Scenarios through FA Davis publishers
  - Online virtual simulation program that guides students in real-life patient scenarios
  - Case study is presented in patient overview
  - Student engages in data collection and data reporting
  - Laboratory and diagnostic tests review
  - Cases present clustered data for clinical decision-making skills
  - Includes an electronic patient chart for students to document nursing outcomes, nursing interventions, and evaluation of outcomes
  - Provides students with a progress indicator; upon completion students view grades and results are emailed to faculty for formative assessment.
- Virtual Clinical Excursions (VCE) through Elsevier Evolve publishers
  - Online virtual simulation program that guides students through a virtual hospital where patients are real with constantly changing conditions
  - Students collect information, make decisions, and set priorities
  - Students engage in critically thinking about safe medication administration practices
  - Students review the patient electronic medical records (EMR) for physician's orders, laboratory reports, patient education, admission history, and other components of the chart.
  - Students track and trend patient data over time in the electronic medical record to make sound clinical judgments.
  - Drug Guide includes current drug monographs
  - Laboratory Guide offers normal value ranges within the virtual environment

**ATTACHMENT A: Contingency Plan**

	<ul style="list-style-type: none"> <li>• SimChart for Nursing through Elsevier Evolve             <ul style="list-style-type: none"> <li>• Web-based electronic health record (EHR)</li> <li>• Loaded with pre-built unfolding case studies</li> <li>• Integrated with clinical decision support tools</li> <li>• Provides evaluation and reporting tools for faculty to grade students' documentation and generate reports</li> </ul> </li> </ul>
<p>6. Ongoing Support for Faculty and Students</p>	<ul style="list-style-type: none"> <li>• Ongoing individualized and/or group faculty support available from Education Technology Staff and Corporate Education Team via Skype conference calls</li> <li>• Development and revision of Policy &amp; Procedures as guidance, questions, and issues arise – COVID 19 Education Guidelines</li> <li>• Faculty available on Canvas through BigBlueButton to communicate and provide individualized student support as needed.</li> <li>• Daily outreach to Directors of Nursing and Assistant Directors of Nursing to discuss any issues that arise unexpectedly.</li> <li>• Daily review of student attendance and faculty outreach</li> <li>• Daily individualized campus virtual meetings for administrative, faculty, and student support.</li> </ul>

**Smith, Helen**

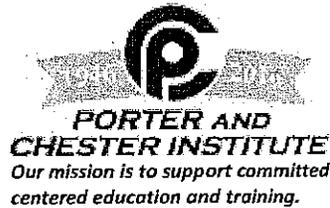
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**From:** Debra Hessell <dhessell@porterchester.com>  
**Sent:** Monday, March 16, 2020 7:13 PM  
**To:** Smith, Helen  
**Subject:** Porter and Chester Institute notification  
**Attachments:** Porter and Chester notification.pdf

Good evening

As discussed earlier today, please find attached, a letter notifying the board of applications submitted to our institutional accreditors, ACCSC and the CT Board of Higher Education, in response the recommendations by the DPH, CDC and changes to content delivery from residential to

**Debra Hessell MSN Ed**  
Acting Director of Nursing  
**Porter and Chester Institute**  
774-239-2876 (mobile)  
[www.PorterChester.com](http://www.PorterChester.com)  
[Find us on Facebook](#) 



March 16, 2020

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

Dear Board Members,

Due to the current COVID-19 outbreak and following guidance from the State, the Department of Public Health and the CDC, Porter and Chester Institute has submitted to their institutional accreditor, ACCSC, a "Temporary Application to Offer Distance, Online, or Hybrid Educational Delivery," and have also submitted a "Temporary Application" to the CT Office of Higher Education, both effective March 17, 2020.

This application means that all didactic course material will now be offered in a Blended or Hybrid Learning method and delivered through the schools learning management system, Canvas until it is deemed appropriate for classroom lecture to recommence. This system enables real time lecture and facilitates student interaction with their instructor and class colleagues.

The lecture components of program will be offered on-line as stated above, and the corresponding hands-on lab components of the didactic courses will be conducted on-site once students can return to campus. Discussion boards and other on-line activities will also be used. Students will still have access to their instructor through telephone or email.

Canvas Conference makes a recording of each lecture, and these recordings will be available for students to review for 14 days.

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



Debra Hessel MSN Ed  
Acting Director of Nursing

dhessel@porterchester.com

**Smith, Helen**

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**From:** Debra Hessell <dhessell@porterchester.com>  
**Sent:** Tuesday, March 17, 2020 3:52 PM  
**To:** Smith, Helen  
**Subject:** Porter and Chester PN Consultant  
**Attachments:** SGreifzu\_CV.3.10.20.current. copy.pdf

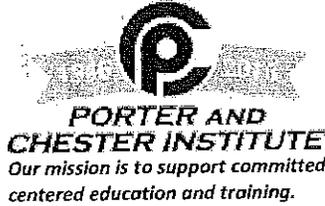
Good afternoon

Please see the attached resume for the nurse consultant hired as previously discussed by Dr. Krebs.

Regards

Debra Hessell

**Debra Hessell MSN Ed**  
Acting Director of Nursing  
**Porter and Chester Institute**  
774-239-2876 (mobile)  
[www.PorterChester.com](http://www.PorterChester.com)  
[Find us on Facebook](#) 



**Sherry P. Greifzu, RN, MSN, AOCN, NEA-BC**  
35 Hunters Mountain Rd  
Oxford, CT 06478  
175 Duval Rd  
Brandon, VT 05733  
203-676-1281  
[sherry.greifzu@gmail.com](mailto:sherry.greifzu@gmail.com)

### **EDUCATION**

MSN – Southern CT State University  
BSN- Southern CT State University  
RN Diploma – Hospital St Raphael, New Haven, CT

### **EXPERIENCE**

**9/2019 to Present**      **Yale New Haven Health, New Haven, CT**  
**Patient Services Manager, Radiation Oncology**  
Provide direct oversight of nursing and patient care for the Radiation Oncology Service line at Yale New Haven Health System. Responsible for the curriculum development for nursing education and patient care quality outcomes for all of the six Yale Satellite Radiation Oncology Centers. Determine the education and quality metrics for the department, working with department managers. Responsible for the staff hiring and financial budgets for all the satellite areas. Collaborate with the physicians to create nursing and physician workflow. Created case study forums and monthly Radiation Oncology Nursing education series for staff development and learning. Supported the department in successful JCO accreditation, and State Accreditation.

**5/2017 to 9/2019**      **Connecticut Children's Medical Center, Hartford, CT**  
**Nursing Director, Ambulatory Services**  
Provide direct oversight of clinical operations for all of ambulatory service specialties, (23) at all satellites and hospital clinics in regional area, CT, MA. (Neurology, neurosurgery, orthopedics, gait, and motion clinic, included) Responsible for the education and quality outcomes of the clinic and staff as well as assuring workflow and financial efficiency. Project Management Lead and co-lead for Various Hospital wide Initiatives; Quality, Practice, Education, Behavioral Health and Service line development. Responsible for the hiring and performance management of clinical staff nurses and nurse managers in Multispecialty Ambulatory Services, Hematology and Oncology, Medical and Surgical Clinics. Responsible for the adherence of all nursing clinical standards, for practice and education in Oncology and other Medical/surgical services. Responsible for creating an acute care group representative for the CT Home Care Association. Clinical Nursing Director for One Call, the organization's Health Care Network referral system. The ambulatory clinic staff comprise of 85 nursing staff, 6 nurse managers, which are direct reports, and 7 nursing staff in Urology, Nephrology and Dialysis areas. Partnering with physicians to achieve patient outcomes in clinical quality as well as patient satisfaction. Produced documentation and prepared Ambulatory staff for First successful Magnet designation this year.  
Submitted abstract with acceptance for Patient Improvement Initiatives to the Children's Hospital Association's annual conference. Submitted poster session

on Behavioral Health Response Team initiative, to annual Nurse Manager's conference this year.

**Member:**

- Quality and Safety Committee
- Clinical Nursing Research Committee
- Chemotherapy Safety Committee
- Suicide Prevention Committee
- CLABSI improvement initiative- Director and co- clinical lead for quality tool development for standardization of CVL procedures and practice
- Behavior Health Response Planning Committee
- Behavioral Health Committee- Team leader and clinical support for developing Screening tool for patients at risk for aggressive behavior
- EMT Incident Command Committee, Planning Chief
- Hospital Informatics Committee-supports the EHR upgrades and clinical rebuilds
- Clinical Ambulatory Lead for IT Downtime assessment tool development and standardization for all network clinics
- Lead Clinical Support for Health Network expansion, planning for nursing clinical support of specialty clinics
- Director and Lead for clinical expansion for newly built Infusion Center, serving the state and many disciplines
- Director and Clinical lead for planning for the new Ambulatory Pediatric Dialysis Center
- Provides oversight for competency development and education for RN and MA staff.
- Hospital Clinical and Administrative lead for evaluating and assessing the Home Care initiative feasibility for Community Home Health Care for pediatric patients.
- Nursing Leader for Ambulatory clinical staff preparation for Magnet Survey (2/11/19)
- Member of Physician Clinical Leadership Committee
- Member of CCSG Board of Directors Group
- Co-lead for Upper Age Transition Care committee

**3/2017 to Present**

**Post University, Waterbury, CT**

**Adjunct Faculty, RN to BSN Program**

Teaching Leadership, research, and Evidence Based Practice, Oncology and Death and Dying Courses. Proficient in Blackboard platform.

**11/2016 to Present**

**University of Vermont**

**College of Nursing and Allied Health and Sciences - Advisory Board Member**

**1/2010 to Present**

**Franklin Pierce University Lebanon NH**

**Adjunct Faculty: RN to BSN Program, Graduate MSN Program**

Adjunct faculty for the Nursing program in core courses of Education, Research, Quality Improvement, Microsystems, Leadership, and Curriculum Development for nurses obtaining their Bachelor's and Master's Degree in Nursing. Proficient in Campus Web and e-college for online courses. Revised the graduate nursing curriculum to match the AACN Essential criteria for the program accreditation. Completed cross walk curriculum objectives and content for graduate nursing

courses to meet AACN Essential criteria for accreditation for the Graduate Nursing Program. (June 2018)

**9/2016 to  
5/2017**

**Porter Medical Center, Middlebury, VT**  
**Board of Directors: Member**

**4/2015 to  
5/2017**

**Addison County, Home Health and Hospice**  
**CEO and Director of Clinical Services, Middlebury, VT**

Provides direct oversight and supervision for all departments including clinical services, (Physical Therapy, OT, SLP, MCH, and Social work services), Case Management, the Hospice program, LNA home care services, and the Medicare Waiver Program. Oversees the Quality Improvement Program, Education and Orientation of staff and implementation of the Electronic Medical Record. Collaborates with Finance and reimbursement for achieving the goals and standards of CMS and Hospice Care. Assists in the development and revision of Policies and Procedures to meet the CMS and other regulatory and clinical practice standards. Acted as a liaison to the community physicians and referral centers to aid in ease of transition of care from acute to Hospice and Home Care. Works with the State of VT and national regulatory agencies in meeting scope of practice and regulatory guidelines. Member of the Vermont Medicaid Advisory Board and the VT state Opioid Task Force. Works with the Board of Directors in supporting the mission and vision of the organization and the development of the strategic plan. Provides mentoring and support to the Executive leadership and Management teams in building a culture of quality outcomes, compliance, safety, and ethical performance. Revised processes and work flow for intake and referrals to streamline efficiency and productivity. Certified management staff in regulatory admission process, taking the organization from a deficit to a positive state, (a deficit of 500,000, to a profit of 800,000 within two years).

**1/2012 to  
9/2017**

**Dartmouth Hitchcock Medical Center**  
**Per Diem - Project Assistant**

- Provided quality improvement and clinical consultation to the Providers and clinicians of the Bone Marrow Transplant service for the Successful 2014 FACT Survey (2015)
- Assisted with the re-launch and upgrade of Clinical Practice Guidelines
- Assisted with the education of Oncology Nurses for the Chemotherapy/Biotherapy certification. Provided consultation and writing support for the Magnet Accreditation Process.
- Worked with the Surveillance Team with the development of quality process initiatives and education competency for the Nursing Staff and Physicians for Surveillance Monitoring.

**10/2012 to  
5/2015**

**Novocure Corporation, Portsmouth, NH**  
**Clinical Science Liaison, Medical Affairs**

Provided company sponsored Clinical Trial and IST support, medical information and education to Physicians and staff in Cancer Centers in the Northeast caring for patients with CNS and solid tumors. Assisted Oncology physicians with the development of bench research trials within the realm of Neurological cancers and solid tumors. Field trainer and Educator in Neuro-oncology for employees during orientation. Assisted with the learning module development for the orientation and ongoing staff development for the Company. Poster accepted for presentation at ONS 2015, " *Correlation of Compliance with Improved Efficacy in Tumor Treating Fields*" also accepted at the AANN 2016 conference.

1/2012 to  
10/2012

**Mount Sinai Medical Center, NY, NY**

**Director, Oncology and Medicine Inpatient Services-**

**Interim Director, Nursing Quality** - Provide administrative oversight for Clinical Nurse managers and staff for inpatient Oncology and Medicine services, including Clinical Research Center, Bone Marrow Transplant, Palliative care, MICU and RICU, and APRN staff. Responsible for quality metrics and patient outcomes. financial planning, capital budget and supply management, and service line development. Collaborated with physician teams for organizational goal attainment.

Administrative Participant in Successful FACT Survey for 2012

Co-developed protocols for Oncology service line, (anaphylaxis, hypersensitivity protocol for Radiation therapy and Medical Oncology, Carboplatin protocol)

Member of Sepsis Task force, Readmission Committee, Falls Committee.

Participated in restructuring the nursing orientation program and preceptor program. Spearheaded the Department's APRN orientation and annual competency program. Guided the Nursing Oncology orientation program and competencies.

Realized growth in HCAHPS scores in the first 6 months. Participated in the initiation of Relationship Centered Care Model of Nursing for all departments. Responsible for oversight and direction of nursing quality metrics, collaborating with organization's quality initiatives.

**Member:**

Hospital Performance Improvement Committee

Co Chair Medicine QI Committee

Oncology Chemotherapy Committee

Oncology Administrative Committee

Patient Satisfaction Committee

Heart Failure Committee

Sepsis Early Recognition Initiative

Nursing Informatics Committee

Hospital Readmission Committee

1/2009-

**Dartmouth Hitchcock Medical Center**

**Director of Nursing Practice and Education**

1/2012

**Responsibilities-** Provided over-sight for Nursing Standards development and evidence-based practice for all of nursing practice specialties, inpatient and outpatient services. Supported the staff and Operations of Nursing Research, Education, Practice, Nursing Informatics, Quality and Magnet preparation. Assisted in the development of new service lines for Skin and Wound Care Team and Anticoagulation Services. Assisted the organization in meeting quality and regulatory requirements for nursing practice and education. Participated and supported the Quality and Patient Safety Department with patient care and nursing quality standards intervention. Worked with the clinical transformation team, physicians, and the multidisciplinary staff with the development of order sets and standards development and implementation into the new electronic medical record. Assisted in the development of education programs for the nursing staff.

**Accomplishments as Director of Nursing Practice and Administration:**

- o Assisted in the Creation of Quality measures and processes for evaluating and sustaining the required documentation for the electronic medical record with CPM
- o Co chaired the development of a new Service Line for Skin and Wound Care

- Assisted in the Expansion of the Anticoagulation Service Line
- Worked with Content experts to Create a Standardized Methodology Process (Tool Kits) for Implementing new and required education and practice standards for Care Plan Documentation (CPG's)
- Assisted in the development of the education template and accountability process for incorporating the new electronic medical record documentation into nursing practice
- Assisted in the Revision of Nursing Orientation to incorporate the electronic medical record
- Lead the Development of Nurse initiated Per Protocol order Sets for the electronic record (Medicine and Oncology) Working with IT and Medicine
- Assisted in the Development of documentation policies that support the utilization of the electronic medical record
- Assisted the Anesthesia Dept. in the revision of the Moderate Sedation Nurse Credentialing program
- Responsible for supporting leadership and nursing staff in maintaining the Nursing Scope of Practice throughout the organization
- Worked closely with the NH Board of Nursing to incorporate ANA standards at DH

**Committee Membership:**

Member of the Pharmacy Therapeutics Chemotherapy Sub Committee  
 Co-Chair of the Pharmacy Nurse committee  
 Member of the Medication Safety Committee  
 Member Hospital Quality and Safety Committee  
 Member Quality and Safety Joint Commission Preparedness Committee  
 Chair of the Nursing Policy Oversight Committee  
 Member Electronic Order Set Committee  
 Member EPIC Beacon Oncology Software Planning Committee  
 Practice Chair of Shared Governance Committee  
 Member Shared Governance Executive Committee

**Dartmouth Hitchcock Medical Center**

**Oncology Clinical Nurse Specialist**

**Responsibilities-** Member of the Dartmouth/DHMC IRB. Worked with the Cancer Center Team in supporting the Physicians and Cancer Center's initiatives. Active participant at Tumor Boards, Provided oncology education to staff nurses for the Norris Cotton Cancer Center (Inpatient and Outpatient, BMT Centers). Conducted Patient rounds, and Participated in QI initiatives as well as implementation of Standards of Care. Developed OCN Certification Review Course for staff. Presented in and assisted with the coordination of the Oncology Mini course. Co-ordinated and presented ongoing education for the nursing staff for Oncology certification. Conducted patient physical assessments and care as well as be a resource to other departments in the hospital, assisting them with problem solving for oncology patients with various diagnoses: Renal Cancer, BMT, Hematology, GI, Breast, Lung, Neurology, Melanoma, and Lymphoma.

**Accomplishments as an Oncology CNS:**

- Developed a Chemotherapy Time Out process to improve Chemotherapy Safety Administration and decrease near misses and errors (Presented a Poster Session at ONS Congress 2010)
- Developed an OCN Review Course for nurses seeking certification. (Open to all nurses in VT, NH, ME, NY, MA)
- Achieved Staff Nurse OCN Certification at DHMC - 60%

- Faculty member for the development and revision of the Oncology Mini Course, a Core curriculum for oncology nurse education, (Four day course with many APRN Faculty)
- Assisted in the Development of Evidence Based Policies and Procedures for standards of practice for Nurses and Physicians for Chemotherapy Ordering and Administration
- Co lead with the Institution of a Fall Prevention Program to decrease inpatient falls for oncology patients
- Worked with physicians to decrease length of stay for Oncology patients using retrospective data to revise treatment times and discharge planning.
- Certified staff nurses in Chemotherapy Administration

5/06-  
12/2008

**Novartis Pharmaceutical Company  
Senior Sales Consultant –Hematology/Oncology**

**Responsibilities** - Provided information about FDA approved chemotherapy and biotherapy medications for Chronic Myelogenous Leukemia and Gist, MDS/MPD patients, to customers (physicians, nurses, and pharmacists) in CT, ME, NH, VT. Provided physician and nursing education to all accounts regarding differential diagnosis, co-morbidities and product use, dosing and side effect management. Recognized for 'Best Practice with Team Work" in 2007 in Manchester territory Team member for review of Oral Therapy Compliance Program. Trained education facilitator for Nursing Program, Healing Conversations

**Accomplishments:**

- Developed and presented Oncology Review course for various Private Practice Nurses for OCN Certification (Bennington, VT, Plattsburg, NY, Albany, NY, Rutland, VT, Portland ME, Keene, NH, Dartmouth Med Center, Lebanon, NH)
- Developed Round Table Nursing Education Programs for presentation of all Novartis Products (Hematology/Oncology) for Chemotherapy and Biotherapy

9/05-5/06

**Maria College – Albany, NY  
Adjunct Faculty Nursing Program**

**Responsibilities** - Clinical Instructor for freshman nursing students. Responsible for 30 students in lab lecture, teaching physical assessment, clinical skills and procedures. Responsible for eight students throughout the year working in an acute care hospital setting, (medical oncology) consisting of assessment, physical care, medication administration and care plan evaluation.

3/99-5/06

**Schering Plough Corporation  
Patient Care Clinical Consultant/Sales**

**Responsibilities** - Provided Clinical Consultation for medical management and side effect support regarding the oncology biotech medications for CT and NY territory. Provided education to healthcare providers and the community on a variety of medical and nursing topics related to cancer diagnoses and hepatitis. Assisted hospitals and community practices in administration and treatment management of chemotherapy and biotherapy. Functioned as an Educator, Clinical Nurse Specialist, and Treatment Consultant. Provided oncology education to territory team members

**Accomplishments as a Nurse Consultant:**

- Authored a side effect teaching module for nurses who care for patients receiving biotherapy (Chapters included: Pain management, Depression, Herbal Toxicity)
  - Authored a hepatitis C patient teaching book. Flip chart contained the nurse view and the patient view.
  - Authored Training modules for the sales force on Brain Cancer, Radiation Therapy, Overview of Chemotherapy
  - Presented at the national sales meeting in 2006, a podium session on "The Mechanisms of Action of the Interferon Cascade"
  - Winner of National Nightingale Nursing Award in 2002 for professional accomplishment, team support and clinical expertise
  - 2006- ONS Presentation " FDA and OIG: How it impacts the Pharmaceutical Industry"
  - Participated in corporate training department for oncology education rotation for new hires for chemotherapy and lung cancer sessions
  - Preceptor for newly hired Clinical Consultants

8/96 -3/99

**William W. Backus Hospital Norwich, CT  
Administrative Director, Oncology Services**

**Responsibilities** - Overall responsibility for administrative and financial functions of the building of the Cancer Center including the Yale University affiliated Radiation Cancer Center. Assisted in the Development of the Oncology Service Lines for the community, (Pain Clinic, Tumor Registry, and the Oncology Nursing Services including the Core Course for Nursing Certification). Member of the IRB and worked closely with the Research Committee involving Oncology Phase 3 Clinical Trials. Coordinated oncology community outreach services and education programs for the organization. Began the preparation for Accreditation from The American College of Surgeons. Administrative member of JCAHO Preparation Team for hospital accreditation. Worked with Information Systems to create and design reports for cancer center data for systems operations for radiation and medical oncology.

**Accomplishments:**

- Assisted in the development of contracts for Radiation Oncology Physicians and staff
- Created Budgets for all departments within the service line
- Created Staffing Patterns for each department in the Service Line
- Developed Job Briefs for all personnel
- Developed a Pain Service which resulted in expansion and ROI net revenue > 1 Million (Business Plan RFP development) in the first year
- Created the Oncology Core Course education for clinical staff
- Assisted the organization in the successful Joint Commission survey
- Assisted in the development of evidenced based Policies and Procedures related to the cancer center
- Participated in Research and clinical trials
- Incorporated oncology standards of care for the oncology service line
- Presented at the National Meeting of Medical Administrators on "Developing a Pain Service"
- Hosted Memorial Sloan Kettering to view the Cancer Center Software integration for Radiation Oncology

- 8/88-4/04**      **RN Magazine Medical Economics Montvale, New Jersey**  
**Member, Editorial Board and Contributing Editor**  
**Responsibilities** - Reviewed and published various articles on cancer-related topics for this 300,000 circulation refereed nursing journal.
- 12/84-8/96**      **Hospital of Saint Raphael New Haven, CT**  
**Patient Care Manager, Inpatient Medical Oncology Unit**  
**Responsibilities** - Overall direction and supervision of a 26-bed unit and 45 nursing personnel. Assisted with the development of the cancer center as a participant on the planning task force, involving education, clinical research and quality improvement. Assisted in the development of the Core Oncology Course, participated in cancer nursing and chemotherapy education programs. Member of the Practice and Policy and Procedure committees, IRB and Cancer Committee.  
 Worked with administration for the JCAHO Accreditation Process.
- 4/79-12/84**      **Fox Chase Cancer Center Philadelphia, PA**  
**Nutrition Support Nurse**  
**Staff Nurse, Medical and Surgical Oncology**  
**Responsibilities** - Performed patient care and clinical research trials involving various types of cancers. Worked with the Department of Nutrition Support in assessing and overseeing the nutritional needs of patients undergoing therapy for their cancers. Educated the staff and the community on specific needs of the cancer patients as well as specific topics on cancer therapy. Participated in Phase II and III clinical trials.

#### **AWARDS**

1988-American Cancer Society "Robert Zane's Excellent Patient Care Award"  
 1990-Oncology Nursing Society Undergraduate Scholarship  
 1992-American Cancer Society Graduate Scholarship, One of 20 nationwide received full funds for graduate study.  
 2000- President's Award Hudson Valley District- Schering Plough Corporation  
 2002-Nightengale Award – Schering Plough Corporation  
 2008- Novartis Territory Excellence Team Work Award- New England  
 2019- Connecticut Children's Medical Center- "Star of the Week" Leadership recognition for being a positive leader, and for accomplished work for new satellite multidisciplinary start up clinic. (March 2019).

#### **PROFESSIONAL ORGANIZATIONS**

Oncology Nursing Society  
 National Association for Home Care and Hospice  
 AONE

#### **CERTIFICATIONS**

**OCN** 2001,1997,1993,1989  
**AOCN** 2001, 2005, 2009,2013, (2017-2021).  
**NEA-BC** 2018 to 2023

#### **Certified Trainer**

Oncology Nursing Society- Chemotherapy and Bio-Therapy Course 2009- 2015

## **PUBLICATIONS**

- Greifzu, Sherry. (1980). Multiple Myeloma" in Diseases, Springhouse Corp., Philadelphia.
- Greifzu, Sherry. (1985). "Lung Cancer" in Neoplastic Diseases, Springhouse Corp., Philadelphia.
- Greifzu, Sherry. (1986). Colorectal cancer, when a polyp is more than a polyp", RN Magazine, 49 (10), 26.
- Greifzu, Sherry. (1986). "Breast cancer. The risks and the options", RN Magazine, 49 (10), 26.
- Greifzu, S., Crebase, C., and Winnick, B. (1990). "Lung cancer: by the time it's detected, it may be too late", RN Magazine, 58 (3), 52.
- Greifzu, Radjeski, D., and Winnick, B. (1990). "Oral care is part of cancer care" RN Magazine, 54 (7), 24.
- Greifzu, Sherry. (1991). "Helping cancer patients fight infection" RN Magazine, 54 (7), 24.
- Greifzu, Sherry, and Dest, Vanna. (1991). "When the diagnosis is pancreatic cancer", RN Magazine, 54 (9), 38.
- Greifzu, Sherry, and Dest, Vanna. (1991). "RN master care plan- the patient with pancreatic cancer", RN Magazine, 54 (9), 43.
- Greifzu, S., and Walters, P. (1995). "Chemo- A Nurses Guide" RN Magazine, 1-17.
- Greifzu, Sherry, and Tiedemann, D. (1995). "Prostate cancer, the pros and cons of treatment" RN Magazine, 58(6), 22-26.
- Greifzu, Sherry. (1996). "Chemo quick guide: new agents", RN, 59 (8), 29-31.
- Greifzu, Sherry. (1996). "Grieving families need your help", RN, 58 (9), 22-27.
- Greifzu, Sherry. (1998). " Fighting cancer fatigue" RN, 61 (8), 41-43.
- Greifzu, Sherry. (2003). "Caring for the chronically, critically ill patient" RN
- Greifzu, Sherry. (2004). "Breast cancer, women's health" RN 67 (2), 36-42.

## **UNPUBLISHED THESIS:**

Greifzu, Sherry. (1995). The Relationship of Job Satisfaction to the Construct Hardiness

## **PRESENTATIONS- ONS Congress**

2006- (April) Navigating the Compliance Changes with Pharma Guidelines

2010- (April) Poster Session, May 2010 Congress "Incorporating a Chemotherapy Time Out Process"

2014- Accepted Poster for 2015 Congress-Correlation of Compliance with Improved Efficacy in Tumor Treating Fields

**PRESENTATIONS- AANN Congress- 2016**

*2015- Accepted Poster for 2016 AANN Congress- Correlation of Compliance with Improved Efficacy in Tumor Treating Fields*

**OTHER PRESENTATIONS**

2012- (Feb) "Teaching patients about medication side effects, HCAHPS requirements" Mount Sinai Medical Center

2012- (Sept) Schwartz Grand Rounds - Mount Sinai Medical Center

2012- (Nov) " New York City Chemotherapy Symposium- "Challenges of Oral Chemotherapy Adherence"

2017- Quality A-3 Development- "Standardizing the Medical Assistant Education in Training and Competency Validations: Maximizing their Scope of Practice." Connecticut Children's Medical Center, Hartford, CT (October, 2017)

2019- (Oct) "When a Headache isn't a Headache" Smilow Cancer Center Grand Rounds

2019-Nov. "Simple Question, Powerful Answer: Patient and Family Engagement in Care" Children's Hospital Association, Phoenix, AZ,

## Debra Hessell

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**From:** Debra Hessell  
**Sent:** Tuesday, March 3, 2020 3:46 PM  
**To:** Helen.Smith@ct.gov  
**Subject:** FW: Franklin Jones

Good afternoon

Please see below from Apple Rehab. They cannot locate the orientation document for Mr. Jones but can attest that he was in attendance. I hope this will be sufficient.

Regards

Debra

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**From:** Rachel Webb [mailto:rwebb@apple-rehab.com]  
**Sent:** Tuesday, March 3, 2020 3:14 PM  
**To:** Debra Hessell <dhessell@porterchester.com>  
**Subject:** RE: Franklin Jones

Franklin Jones was here for mandatory inservicing on 2/11/10

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**From:** Debra Hessell [mailto:dhessell@porterchester.com]  
**Sent:** Tuesday, March 3, 2020 1:35 PM  
**To:** Rachel Webb  
**Subject:** RE: Franklin Jones

Thanks. Can you please confirm the date?

Debra

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**From:** Rachel Webb [mailto:rwebb@apple-rehab.com]  
**Sent:** Tuesday, March 3, 2020 1:34 PM  
**To:** Debra Hessell <dhessell@porterchester.com>  
**Subject:** Franklin Jones

Hi Deborah!

Yes, Franklin Jones was here and did attend the mandatory inservice.

Rachel Webb RN S/D

This transmission may contain confidential information that is protected by federal and state law. It is intended only for the use of the individual to which it has been addressed. Only the person named on this transmission is authorized to view any information contained herein. Re-disclosure without proper consent is prohibited. Unauthorized use or disclosure or failure to maintain confidentiality may subject you to penalties under both federal and state law. If you have received this message in error, please contact sender.

April 5, 2020

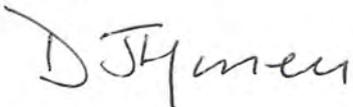
Patricia Bouffard, RN, MSN, Chairperson  
State of Connecticut Board of Examiners for Nursing  
410 Capitol Avenue, MS #13PHO  
P. O. Box 340308  
Hartford, CT 06134-0308

Re: Porter and Chester Institute, Inc.'s Response to Ms. Smith's Report to the Board

Porter and Chester Institute, Inc. ("PCI") appreciates the opportunity to respond to the report provided by Ms. Helen Smith of the State of Connecticut Department of Public Health presented on March 18, 2020 (the "Report") to the State of Connecticut Board of Examiners for Nursing (the "Board"). PCI is of the opinion that the Report is not entirely factually correct and that Ms. Smith completely failed to represent the PCI students' positive learning experiences in her Report. PCI is also of the opinion that Ms. Smith fails to recognize that the PCI students are in a learning environment and are not expected to perform at a level that is equal to that of a fully educated practical nurse. The Report also fails to account for the fact that Ms. Smith was perceived by the students and faculty and in some cases, the facility staff, as being overly critical and intimidating to the students and instructors. PCI prides itself with respect to the quality of its nursing students that ultimately serve the residents of Connecticut. PCI also prides itself with respect to the enormous efforts it has made to address alleged deficiencies previously identified by Ms. Smith. Accordingly, PCI requests that the Board consider the PCI responses as a more balanced view of Ms. Smith's Report. Most importantly, PCI takes quite seriously the attempts by some to prejudge PCI without due process and the opportunity to fully respond to the allegations and aspersions discussed at the March 18, 2020 Board meeting.

We look forward to presenting additional work that PCI is currently engaged in undertaking. In the meantime, we hope you are safe. If you have any questions, please do not hesitate to call.

Very truly yours,



Debra Hessell, RN, MSN  
Acting Director of Nursing

Copy to: Attorney Joan W. Feldman Esq.

## **Response to BOEN presentation on March 18, 2020**

Porter and Chester Institute (PCI) appreciates the opportunity to respond to the report made by Ms. Helen Smith on behalf of the State of Connecticut Department of Public Health to the State of Connecticut Board of Examiners for Nursing (Board) at its March 18, 2020 meeting. PCI's Director of Clinical Experience (DCE) was present during the visits made by Ms. Smith to the PCI clinical sites on February, 2020. PCI's Acting Director of Nursing (DON) was also present during the start of Ms. Smith's visits and received feedback from Ms. Smith once the clinical experience ended.

As detailed in Ms. Smith's outline, Porter and Chester will address each site visit per campus.

**Enfield** - visit date 02/11/2020, day program, 8<sup>th</sup> Term, 4 students and 1 Instructor. The following sets forth Ms. Smith's findings and PCI's response to such findings:

Ms. Smith: The instructor requested that students who arrived early to the clinical location determine if the patients assigned to each student were still at the facility (so that necessary changes to the student assignment can be made by the instructor).

**PCI Response:** PCI has reminded all faculty and students that faculty must be present before attending to any residents and that it is the instructor's responsibility to confirm that patients are present at the clinical site. Any student arriving early at a facility must wait for the instructor in the room where the pre-conference is to be held.

Ms. Smith: The PCI instructor and the students were not aware of the location of the nursing policy and procedure manual, infection control manual and Safety Data Sheet (SDS or MSDS) manual.

**PCI Response:** PCI did provide the orientation checklists for the 8 students and instructor and all were informed regarding the location of these manuals. The orientation was completed by the facility staff on 07/24/2019 and 01/20/2020. At this particular facility site, all of the policies were electronic. The facility's infection control book, the SDS, MSDS were held in the supervisor's office and the facility stated that they would provide printed copies for easier access by the students and faculty.

Ms. Smith: The student assignment was not posted at the nursing station- unsure how the student responsibilities were communicated to the facility staff.

**PCI Response:** The assignment was posted by the PCI instructor on the prior evening. Unfortunately, unbeknownst to the instructor, it had been removed by the nursing staff at the facility. This was a recurring issue that had been addressed with the facility management on several occasions. An alternate location for posting assignments has been recommended

by the DCE.

Ms. Smith: The instructor directed the students to complete patient “assessments”.

PCI Response: The PCI instructor used the word “assessment” in error and quickly corrected herself stating that PN’s do not “assess.” Further, the PCI curriculum does not at all reflect that PN’s assess. There is no evidence that PCI instructs its students to assess.

Ms. Smith: Students were observed not checking/verifying the patient’s identity (i.e., checking the patient’s name band) prior to providing care and services. In addition, multiple patients that the students provided care and services to, did not have a name band in place.

PCI Response: The residents to which the students were assigned all had wrist bands in place. Ms. Smith asked students to perform finger sticks on other residents, 2 of which did not have a wrist band. Picture IDs are in the medical record, as per facility policy, which were reviewed by the students prior to performing the finger stick.

Ms. Smith: Students were observed with their cell phones when on the clinical unit, which is not in accordance with the PCI clinical expectations.

PCI Response: Having cell phones on the clinical sites is not consistent with PCI standards and instruction and the subject students were counseled regarding the use of cell phones on resident units.

Ms. Smith: The instructor failed to review the individualized patient care plan with 3 students who had a change in patient assignment prior to the students providing care and services and during the entire clinical day.

PCI Response: The DCE witnessed the instructor reviewing the care plan with each of the students who had a change in their assignments.

Ms. Smith: Observed one student asking a facility Certified Nursing Assistant for direction in order to provide care and services to a patient.

PCI Response: It was noted that students asked the CNA for additional linen. None of the students were observed requesting guidance on providing care to the residents.

Ms. Smith: Unsure if each student performed the duties for each patient that were assigned to them by the PCI instructor including complete “Activities of Daily Living” (ADL) as no student was ever observed completing any ADLs.

PCI Response: The DCE observed students with towels and linens and providing personal care to each of their assigned residents.

Ms. Smith: Students were not using gloves when necessary-when providing direct care and handling “dirty” equipment.

PCI Response: The student did not have the med-pass cart outside the room while performing a blood sugar check, and as such removed her dirty gloves prior to leaving the resident’s room. The student left the resident’s room carrying the glucometer in his/her ungloved hands, as walking in the corridor with gloves on, is not permitted. The student then cleaned the glucometer per facility policy and washed his/her hands. Nevertheless, the instructor met with the student and reviewed proper procedure for handling the dirty equipment.

Ms. Smith: Students were not completing hand hygiene/washing after removing “dirty” gloves and before donning “clean” gloves.

PCI Response: During an observation, a student omitted hand hygiene once after removing dirty gloves during a dressing change. This was completed properly by the student for a subsequent dressing change performed by this student. Nevertheless, the instructor discussed with the student the proper protocol relating to hand hygiene.

Ms. Smith: Instructor directed students to clean patient environmental surfaces with hand sanitizer which is not in accordance with the facility policy & procedure.

PCI Response: The instructor did not direct the student to clean the surface with hand sanitizer, this was an error on behalf of the student and was remediated with the student. During a different observation, Ms. Smith challenged a different student during their setup in preparation for a dressing change. Ms. Smith directed the student to stop the treatment as they had not allowed the sanitizer to dry per manufacturer’s specifications. The student corrected Ms. Smith and stated that the required dry time was 1 minute, which is the length of time the student waited. Ms. Smith confirmed this was indeed correct.

Ms. Smith: Please note: After this observation the instructor was asked to provide information that this practice is consistent with facility policies and procedures and/or with the manufacturer’s directions (the hand sanitizer). It was determined that this practice was not consistent with the facility infection control policy and procedure which was to clean the patient environmental surfaces with a “hospital grade disinfectant and germicide” and the manufacturer’s direction to use the hand sanitizer for “hand use only”. It was observed that the facility had Micro-Kill wipes readily available. The instructor identified that during the orientation they were not educated on use of these wipes.

PCI Response: The instructor did not state that she was not oriented or educated on the use of the sanitizing wipes.

Ms. Smith: Instructor directed students to clean the point of care devices, the blood glucose monitors, in a manner differently than the facility practice/directions.

PCI Response: The cleaning of the equipment was according to facility policy.

Ms. Smith: Resident Rights-The Instructor had not ensured that each patient consented to have a student provide care and services.

PCI Response: Patient consent was indicated on the assignment sheet that had been removed by staff. This facility does have an admission consent form stating that students may be providing care and treatment to them. The facility informed the instructor and Ms. Smith that the consents are in the "electronic medical record" and the instructor had access to those consents.

Ms. Smith: Students did not consistently knock on the patients' doors prior to entering the patient rooms.

PCI Response: This omission was not observed by PCI's DCE. Rather, students were observed to be knocking on the door of the resident's room as appropriate.

Ms. Smith: The cart containing patient specific supplies (with Health Protected Patient Information) for wound and skin treatments, that was exclusively used by the students was not locked/secured while in a hallway.

PCI Response: The subject treatment cart was not exclusively for student use. The facility has 2 treatment carts, 1 of which is shared with the students. It is the facility's practice, not to lock treatment carts and as such, the key was not available. The instructor located a key in order to secure the cart. According to the facility, the wound care nurse (who arrives at the facility at 9:00 A.M.) had one key for that cart and provided that key to the instructor upon Department request. The instructor located a key in order to secure the cart.

Ms. Smith: In a public area a student loudly stated a negative comment regarding a patient's past refusal of care.

PCI Response: A student expressed happiness when a resident who was previously noncompliant was how being compliant with his diabetes treatment. The comments were made directly to the PCI DCE in a conversational tone. Nevertheless, the student was

counseled to have such exchanges in a more private and secure location.

Ms. Smith: During the post-clinical conference, a student referred to a patient by a disrespectful term and not a patient/person with medical diagnosis. The instructor failed to provide re-education to that student and the other students present. The PCI Director of Clinical Nursing then provided in-depth education to that student and the entire group.

PCI Response: During post-conference, in a closed room away from residents, a student was discussing a resident she had been caring for and identified them as being an addict. This was observed by the DCE and DON, and was not said in a disrespectful manner but in a compassionate manner. The DCE used this as a learning opportunity to discuss with students that addiction is a disease and not a lifestyle choice.

**Hamden-** visit date 02/18/2020, day program, 11<sup>th</sup> Term, 5 students and 1 Instructor (please note: one of the Term 5 students was re-assigned to a Term 4 clinical group at the same location and according to this PCI instructor this is usual practice as this Term 5 group contains 12 students).

PCI Response: There were 3 PCI faculty at the subject facility. Term 4 students (12 students) were on a different floor to the term 5 students. During term 5, students perform “team lead” training for which they are evaluated, in addition to their level 2 clinical competencies. Level 4 students also are evaluated using level 2 competencies. Two students from term 5 are rotated to the other group to perform their “team lead” competencies under faculty supervision. At no time, was the instructor on the floor with more than 10 term 5 students.

Ms. Smith: The instructor was not aware of the location of the pharmacy policy and procedure manual and many facility policies and procedures including use of allergy bracelets, patient identification during medication administration, drug destruction and/or Advance Directives.

PCI Response: The subject facility provided the orientation checklists for the 10 students and instructor, which was completed by the facility staff on 01/22/2020. In addition to the facility orientation, the DCE also spent a day and evening orienting the faculty and students to the facility and the facility’s EMR system.

Ms. Smith: There was no pre-clinical conference and the post-clinical conference was informal, brief and was not consistent with the topic listed on the PCI Clinical Assignment Sheet dated 02/18/2020 (post conference listed from 2:00 to 3:30 P.M. and the topic was “wounds”).

PCI Response: Following the feedback from Ms. Smith, the instructor was asked why she did not complete pre and post conference, she stated that Ms. Smith had made her very nervous and she just wanted to start the day. The instructor had remediation to emphasize the importance of conferences even in the most stressful of times.

Ms. Smith: Student was observed with a cell phone when on the clinical unit which is not in accordance with the PCI clinical expectations.

PCI Response: On this occasion, a student was looking up a side-effect of a drug. The instructor reiterated with the students that cell phones should not be used while in the facility.

Ms. Smith: Student stated that she completed a patient transfer using a gait belt. According to the facility staff, the orientation documentation and the instructor, the students are not permitted to complete any patient transfers.

PCI Response: This has since been remediated and students are not transferring patients per facility policy.

Ms. Smith: Students were not aware that they had access to the patient care plan in the electronic health record and did not review the individualized patient care plans (2 of 5 students) prior to providing care and services to those patients. One student asked the facility Certified Nursing Assistant for patient information in order to provide care and services to that patient (as she had not reviewed the patient care plan).

PCI Response: Students were fully aware of their access to the EMR. This was done as part of the orientation by the DCE. Students were observed by DON during her time onsite on the same day (approximately 2 hours), accessing the EMR under their student access rights. In addition, Ms. Smith was observed taking students individually into the office to have them demonstrate how to locate policies.

Ms. Smith: Observations during medication administration (2 students administered medication to 2 patients): (i) the instructor failed to ask either student any questions about the medications including action, use, nursing implications and side effects (even after the Department discussed this topic with the instructor); and (ii) one student inaccurately identified that a medication had expired, and the instructor agreed. Upon review of the "medication card" the Department identified that the expiration of that medication was approximately in 2 years. The instructor failed to re-educate the student and directed her to administer the medication.

PCI Response: This facility's practice is to reissue medication previously dispensed by the facility pharmacy to other residents. Bubble packs and medication containers are re-labelled after the previous label is removed which can cause confusion as noted. Ms. Smith discussed this practice with the facility pharmacist.

Ms. Smith: One student attempted to administer a medication that was different than what was ordered by the medical provider- the Department did not allow this medication to be administered (potential medication error).

PCI Response: It is unclear what the medication in question was as this was not noted at the time however; in speaking with the facility floor supervisor, the medication was the correct drug, the full name of the drug was not written on the order when compared to the name on the drug label. The floor supervisor spoke to the pharmacist who confirmed the drug as being correct. The drug was administered by the floor supervisor. There was no error.

Ms. Smith: One student failed to verify the patient's identity (via checking the name band) prior to administering medications on two separate occasions (even after the Department discussed this topic with the instructor). The instructor discarded medications improperly (discarded in the trash) and not in accordance with the facility policy and procedure.

PCI Response: The facility does not have a policy for medication disposal. Ms. Smith discussed this with the facility's pharmacist and the staff development department. PCI has

been informed that this policy is currently being reviewed by the facility.

Ms. Helen Smith: Resident Rights:

The Instructor had not ensured that each patient consented to have a student provide care and services (both in writing and verbally). Instructor and students were not aware of the location of the consent to have a student.

PCI Response: Following this visit, the DON was requested by the facility's floor supervisor to return to the facility to discuss the day's events. The facility floor supervisor had concerns regarding the visit that day and her observations of the actions of Ms. Smith. Specifically, her opinion was that Ms. Smith came across in an intimidating manner to both the instructor and the students. The DON thanked the staff member for her feedback and asked her to provide her with an email expressing her concerns. The DON has since learned that the supervisor subsequently decided not to put her concerns in writing as she did not want to "create any issues." The instructor was terminated following this visit as she had not demonstrated improvement on her performance improvement plan.

**Stratford campus**-visit date 02/20/2020, day program, 4 Term 4 students and 1 Instructor.

Ms. Smith: All students failed to check the patient medical records for medical provider orders prior to providing care and services and were not aware of medical diagnoses and/or current medical conditions.

PCI Response: The PCI Education Supervisor (who was present during the visit) directly observed the instructor reviewing the patient records individually with the students. While the students were waiting to review the records, they went into the resident rooms to greet the residents and say "good morning."

Ms. Smith: One patient (assigned to a student) was observed to have oxygen being administered at a higher flow rate than what was ordered (for approximately 45- 50 minutes).

PCI Response: At the Board of Nursing meeting, it was stated that the "department" noted this when, in fact, it was the student who identified the error. (The patient was receiving 2.5 liters of oxygen, rather than 2 liters of oxygen.) Following the feedback meeting, Ms. Smith stated that she was pleased the student noted the error, but "would have preferred it was rectified sooner".

Ms. Smith: Observed two students completing a bed bath and they used "perineal cleanser" in place of soap (this patient was identified at risk for skin breakdown) which was not in accordance with the facility policy and procedure.

PCI Response: The matter was immediately corrected by the student and the instructor reviewed the proper protocol with the student after the fact. There were no ill effects or skin breakdown experienced by the resident. The students completed orientation to this facility on 05/13/2019 complete by a PCI instructor. During the feedback in the presence of the facility administration, Ms. Smith stated that she had observed one of the best post-conferences that she had ever seen and that since her last visit observing this instructor, she had seen improvement. Ms. Smith also stated to the facility administration and to the PCI staff present, that the students she observed that day were very professional, polite and worked cohesively as a team and that she was very impressed by what she saw.

Rocky Hill campus- visit date 02/26/2020, evening program, 5 Term 4 students and 1 instructor.

Ms. Smith: The instructor arrived late.

PCI Response: The instructor was delayed in leaving his day position due to an emergency at his prior clinical site. While he informed Ms. Smith, it was due to traffic, he later told the DON that it was due to an emergency at work.

Ms. Smith: The instructor distributed the assignment late (35-38 minutes after the start of the scheduled clinical experience).

PCI Response: The instructor was late in this one instance due to the fact that he had a work emergency that delayed his arrival and once he arrived at the facility, he had to confirm that consent was in place for each resident that the students were assigned to.

Ms. Smith: One student arrived 20 minutes late and signed-in "on time" which was not accurate.

PCI Response: The student was counseled the following day, with respect to the importance of accurate documentation and her attendance record for that evening was corrected.

Ms. Smith: There was no pre-clinical conference.

PCI Response: Due to the reason stated above, there was no pre-clinical conference and this can happen with any unexpected emergency. However, the instructor made sure to have contact with each student on an individualized basis to make sure that the students were prepared for their assignment.

Ms. Smith: Two students had a "LPN" pin (the Department asked them to remove the pin and that pin was not part of the PCI dress code).

PCI Response: This was identified by Ms. Smith prior to the instructors' arrival so the opportunity for the instructor to correct was not possible. However, each student was counseled and told why it was inappropriate to hold themselves out as LPNs.

Ms. Smith: The instructor and the students were not aware of the location of the nursing policy and procedure manual.

PCI's Response: This is inaccurate. The instructor and the students were aware of the location; however, they were located in the facility's staff development office which was locked and the key was not able to be located by the evening supervisor when requested by PCI.

Ms. Smith: The facility provided the orientation checklists for the 8 students which was

completed by the facility staff on 02/11/2020. The orientation does not seem to be comprehensive as it does not address the identified areas of concerns.

**PCI Response:** PCI has written documentation that the instructor attended the facility's Staff Development orientation and the facility Staff Development Educator in writing has confirmed that the subject instructor was present during the mandatory orientation. The facility provided a sign in sheet as proof of his attendance which was subsequently forwarded to Ms. Smith. See Exhibit 1 attached hereto.

Ms. Smith: As of 02/26/2020 one student did not sign and provide the PCI instructor the orientation paperwork (her orientation was completed on 02/12/20) although she participated in the clinical experience.

**PCI Response:** All students have signed the orientation checklists.

Ms. Smith: The instructor was not familiar with the patients' medical diagnoses, treatments, medications, care plans and/or care needs.

**PCI Response:** See below

Ms. Smith: The instructor was not familiar with navigation of the electronic medical records that included the patient care plans and nursing notes although he stated he was provided a "brief orientation" of the electronic medical record. The instructor was observed asking two facility staff members multiple questions regarding how to navigate the electronic medical records.

**PCI Response:** This is inaccurate, the instructor was observed by the DCE sitting with students individually, reviewing the EMR with students.

Ms. Smith: The instructor failed to review the individualized patient care plan with the students prior to the students providing care and services to each patient.

**PCI's Response:** The instructor was familiar with each resident's diagnosis and plan of care and met with students individually to review with the students.

Ms. Smith: All students were not knowledgeable about the patients' medical diagnoses, medical provider orders, medications, consultations and treatments.

**PCI Response:** Students had reviewed the patient medical records with the instructor during the course of the evening. During a meeting with the students and the DON during an observation being performed by Ms. Smith; students expressed feelings of intimidation and feeling belittled by Ms. Smith, making them extremely nervous when being asked questions by her. They stated that they are students and are still learning and if they did not know something, they would always ask their instructor.

Ms. Smith: One patient (assigned to a student) was observed to have oxygen being administered not in accordance with the medical provider order (was not humidified and was not administered as ordered).

PCI Response: The student reported this finding to a facility staff member and was told to continue the oxygen at the current setting. \

Ms. Smith: The instructor had not ensured that each patient consented to have a student provide care and services (both in writing and verbally). One patient stated, "was told he would have a student" and one patient stated, "I was asked if I wanted a student in the beginning". The instructor and students were not aware of the location of the written consent to have a student (in the medical record).

Per Department interview with this clinical group, it was identified that they did not complete the scheduled clinical experience on 02/25/2020 at this same clinical location. On 03/02/2020 the Interim Director of the PCI Practical Nursing Program stated that the instructor notified the students on 02/25 that the clinical experience was cancelled, and he did not notify the campus manager of the cancellation. PCI rescheduled that clinical experience.

PCI Response: The faculty member was sick on 2/25/2020 and had left a message at the campus that evening which was not received by the DCE until 2/27/2020. The clinical experience was rescheduled as noted. Prior to the post-conference, Ms. Smith asked why 3 students had left early, the instructor replied 1 was pregnant and felt sick, 1 left as she was moving house and the other left without a reason. At the conclusion of the feedback meeting, the instructor stated that the reason why the 3 students left was that they were very uncomfortable and felt intimidated by Ms. Smith. Ms. Smith apologized and stated that was not her intention. During the conversation, the instructor handed the DON a hand written note. It was only after the instructor left that she read the note which stated, that he was resigning effective immediately.

**Waterbury campus:** visit date 03/02/2020, day program, 12 Term 5 students and 2 instructors (9 students were assigned to one instructor and three were assigned to the second instructor for medication administration then one of those students was removed and sent back to campus for remediation).

Ms. Smith: There was a delay, until approximately 9:00 A.M., in preparing the student assignment by one instructor (for the 3 students).

PCI Response: The delay was due to the computer being locked in the administrator's office following a visit by the Department the prior week. Because it could not be accessed, the instructor needed to assign patients after gaining their consent. During this time, the computer was released and the students were reassigned to med-pass responsibilities.

Ms. Smith: When one student was sent back to campus, the instructor failed to update the clinical assignment which was posted at the nursing station.

PCI Response: The lead faculty who was responsible for liaising with the floor manager was informed of this omission.

Ms. Smith: Students were not aware of the location of the Infection Control and the Safety Data Sheet (SDS or MSDS) manuals.

PCI Response: PCI provided the orientation checklists for the 12 students and 2 instructors which reflected that all were educated on the location of these manuals.

Ms. Smith: Students were not knowledgeable about many facility policies and procedures including patient identification, seizure precautions and disinfection of patient care equipment.

PCI Response: PCI disagrees because students were observed cleaning equipment according to facility policy.

Ms. Smith: One student stated she was "completing a patient assessment" when completing a head to toe evaluation.

PCI Response: This was not intentional and it was in error. The student immediately corrected herself and stated that she does not assess, she evaluates.

Ms. Smith: One student was observed "palpating the radial pulse" in an incorrect body location.

PCI Response: This is the student that was sent back to campus for remediation and confirmation of the specific identified competencies.

Ms. Smith: One student could not explain the treatment/procedure that he was assigned to complete (for his patient).

PCI Response. The students were nervous with Ms. Smith present and students are not perfect that is why they are students. This was discussed with the student during post conference.

Ms. Smith: Observations during medication administration (2 students administered medication to 2 patients): The instructor failed to ask either student any questions about the medications including action, use, nursing implications and side effects. This instructor completed a "medication review" with these students during the post conference.

PCI Response: The medication review in post-conference was very comprehensive. Remediation was provided to instructor to ensure that the instructor understood the importance of questioning students during the administration of medication.

Ms. Smith: Both students failed to verify the patient's identity (via checking the name band) prior to administering all medications (even after the Department discussed this topic with the instructor and student during the first observation).

PCI Response. This was corrected once by the instructor but, not the second time. The instructor was spoken with regarding the importance of enforcing these basics with the students. Again, the instructor was nervous in the presence of Ms. Smith.

Ms. Smith: Observed students not completing hand hygiene/washing after removing "dirty" gloves and before donning "clean" gloves (even with ongoing instructor verbal directions and the Department requesting that hand hygiene be completed).

PCI Response: This is the same student that was sent back to campus for remediation.

Ms. Smith: One student did not disinfect multiple pieces (6) of "dirty" patient care equipment (5 pieces of her own and 1 facility) appropriately, not in accordance with facility policy and procedure and could not articulate what is "clean" and what is "disinfected".

PCI Response: This is the same student that was sent back to the campus for remediation. All programs have students that struggle to achieve all competencies at the same pace.

Ms. Smith: One student left the medication cart with patient specific medications (with Health Protected Patient Information) that was exclusively used by the students, unsecured in the hallway (even with ongoing instructor verbal directions).

PCI Response: The medication cart was not left unattended in that the faculty intervened and corrected this immediately.

Ms. Smith: One patient identified that the PCI instructor had not asked him if he was agreeable to have a student (verbal consent) although the instructor stated she had obtained a verbal consent.

PCI Response: The patient recanted this statement and said they were asked for their consent.

## PHONE CALLS/SCOPE OF PRACTICE QUESTIONS SUMMARY – MONTH: February 2020 (56 calls)

Answered with or without written documents

### APRNs 9 calls:

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

### RNs 11 calls:

- 4-Request a copy of the RN scope of practice. *Refer to the BOEN website and the CT NPA.*
- Can a RN administer intravenous fluids absent a medical provider order? *No, it is not within the scope of a RN to prescribe intravenous fluids (refer to the CT NPA).*
- 3-Request updates on RN renewal applications. *Refer to the Department’s licensing staff.*
- Request update on RN application (based on out of state license). *Refer to the Department’s licensing staff.*
- 2-RN licensed in New York; does she need a CT RN license to work in CT? *Yes, refer to the BOEN website and the CT NPA.*

### LPNs 9 calls:

- 8-Request a copy of the LPN scope of practice. *Refer to the BOEN website and the CT NPA.*
- Can a LPN perform cosmetic medical procedures at a Medical Spa? *No, refer to the Medical Spa Statute 19a-903 c.*

### ULAP 6 calls:

- Can a Medical Assistant (MA) administer medications? *No.*
- Can a MA debride a wound then complete a dressing (to that wound)? *No.*
- 2- Request a copy of the scope of a MA. *As the Department does not license MA the Department cannot provide a scope but may want to refer to the BOEN website and the Declaratory Ruling of Delegation to ULAP.*
- Can a MA remove sutures? *No.*
- Can a MA remove an intravenous catheter or a urinary catheter? *No.*

### Schools 11 calls:

- 3-Porter & Chester Institute (PCI): changes in the student clinical schedules.
- 2-Central CT State University; follow up on documentation for Dr. Thomas.
- Can a school nurse take verbal orders from an out of state physician (from Puerto Rico)? *No, the physician must be licensed in Connecticut.*

- Yale School of Nursing: request copies of the NCLEX results (including the student names and test results) from 2015-2018. *Updated the school that the Department does not retain that information.*
- 2-Georgetown University: Does the BOEN and/or the Department have oversight of post-licensure nursing programs. *No.*
- Goodwin University: Does the BOEN and/or the Department have oversight of post-licensure nursing programs. *No.*
- Norwalk Community College: Request information about applying for a CT RN license based on nursing education completed in a country outside of the United States. *Refer to the Department website, Practitioner Licensing, RN, Exam by licensure and refer to the Department's licensing staff.*

**Guidelines/Other 10 calls:**

- Request information about administration of medications by school personnel (not nurses). *Refer to Regulations 10-212a-1 to 10-212a-7.*
- Attorney from New York request information on licensing of outpatient clinics. *Refer to the Facility Licensing Section.*
- 2-In the process of setting up a Medical Spa requesting guidance on the organizational structure. *Refer to the Medical Spa Statute 19a-903 c.*
- 6 NCSBN surveys including: APRN survey, discipline, education, assistive personnel, Board structure and licensure.

## PHONE CALLS/SCOPE OF PRACTICE QUESTIONS SUMMARY – MONTH: March 2020 (39 calls)

Answered with or without written documents

### APRNs 14 calls:

- 2-Request information on collaborative practice agreements. *Refer to the Department website, Practitioner Licensing and APRN Collaborative Agreements.*
- 7-Request a copy of the APRN scope of practice. *Refer to the Board of Examiners for Nursing (BOEN) website and the Connecticut (CT) Nurse Practice Act (NPA).*
- 2-If a CT licensed APRN is providing care and services in Massachusetts (MA) and wants to know if she needs licenses (RN and APRN) in MA? *Refer to the MA Board of Nursing.*
- An APRN who is Certified as an Adult Geriatric Primary Care Nurse Practitioner is requesting the scope for an Adult Geriatric Primary Care Nurse Practitioner. *Refer to the certifying body and the BOEN website for the CT NPA.*
- APRN licensed in another state request information on how to apply for a CT RN & APRN licenses. *Refer to the Department website, Practitioner Licensing, APRN & RN and refer to the Department's licensing staff.*
- Request an update on an APRN renewal application. *Refer to the Department's licensing staff.*

### RNs 8 calls:

- 2-Request a copy of the RN scope of practice. *Refer to the BOEN website and the CT NPA.*
- RN requesting information about the practice of auricular acupuncture at a licensed health care facility in CT. *Refer to the scope of Acupuncturists (CT General Statutes, Chapter 384c) and specifically the section that address the auricular acupuncture [2-206bb (h)] and referred the caller to a Supervisor in the Facility Licensing & Investigation Section (FLIS).*
- Can a RN complete a medical history & physical? *No, it is not within the scope of a RN to complete a medical history and physical (refer to the CT NPA).*
- RN request information on how to be a licensed behavioral health care facility. *Refer to the Supervisor of that level of care in FLIS.*
- 2-Request updates on RN renewal applications. *Refer to the Department's licensing staff.*
- RN works in a Hospital Operating Room (OR) and requesting a scope for a "hospital RN that works in the OR". *Refer to the BOEN website and the CT NPA and may want to refer to specialty professional nursing organization(s).*

### LPNs 6 calls:

- 4-Request a copy of the LPN scope of practice. *Refer to the BOEN website and the CT NPA.*
- Can a LPN work without the RN or APRN direction? *No, refer to the BOEN website and the CT NPA.*
- LPN licensed in another state (not CT) asking if she needs a CT LPN license to work in CT? *Yes, refer to the BOEN website and the CT NPA.*

**Schools 5 calls:**

- University of Southern Maine: Does the BOEN and/or the Department have oversight of post-licensure nursing programs. *No.*
- Goodwin University: Request the NCLEX program code for the AD program. *Provided.*
- Sacred Heart University: Request information on how the BOEN Meeting minutes are posted for public review. *Refer to the Department's Public Hearing Office staff.*
- CT Community College Nursing Program: Request to be placed on the agenda for upcoming BOEN meeting.
- Three Rives Community College: Discuss legal implications of College instructors co-signing the nursing students' entries (into medical records). *Not able to provide legal advice/guidance.*

**Guidelines/Other 6 calls:**

- NCSBN surveys: COVID-19 and mandatory drug screening,
- Vermont Board of Nursing: Request information about the process of how to open a "new" nursing program in CT. *Provided the Feasibility study document and the Nursing Education Programs and Licensure Requirements Regulations.*
- Caller asking how to apply for a CT "license" as a CNA. *Refer to Department staff who works with the CNA programs in CT.*
- Request to speak with a Supervisor in the Facility Licensing & Investigation Section (FLIS) to make a complaint about a long-term care facility. *Refer to a FLIS Supervisor.*
- In the process of setting up a Medical Spa requesting guidance on the organizational structure. *Refer to the Medical Spa Statute 19a-903 c.*
- Nationwide Anesthesia Services: Request the CT Nurse Practice Act. *Refer to the BOEN website and the CT NPA.*

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

Brian Gross, RN  
License No. 073716

Petition No. 2019-536

**MEMORANDUM OF DECISION**

***Procedural Background***

On May 31, 2019, the Department of Public Health ("Department") filed a Motion for Summary Suspension ("Motion") and a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board") against Brian Gross ("Respondent"). Board ("Bd.") Exhibit ("Ex.") 1, 2. The Charges allege violations of Chapter 378 of the General Statutes of Connecticut ("Conn. Gen. Stat." or "Statutes") 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 June 19, 2019, based on the allegations in the Charges and affidavits and reports attached to the Motion, the Board found that Respondent's continued practice as a nurse presented a clear and immediate danger to public health and safety. On that date, the Board ordered, pursuant to Conn. Gen. Stat. §§ 4-182(c) and 19a-17(c), that Respondent's RN license be summarily suspended pending a final determination by the Board of the allegations contained in the Charges. Bd. Ex. 2.

On June 19, 2019, the Motion, Charges, Summary Suspension Order, and Notice of Hearing scheduled for July 17, 2019, were sent to Respondent. Bd. Ex. 1-3. On July 17, 2019, the hearing was convened. Respondent appeared *pro se* and orally answered the Charges on the record. Transcript ("Tr.") pp. 5-7. Attorney Diane Wilan represented the Department. Both parties were afforded the opportunity to present witnesses and evidence, examine and cross-examine witnesses, and provide argument on all issues.

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). To the extent the findings of fact actually represent conclusions of law, they should be so considered, and vice versa. *SAS Inst., Inc., v. S & H Computer Systems, Inc.*, 605 F. Supp. 816 (Md. Tenn. 1985).

*Allegations*

***Count One***

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Feeding Hills, Massachusetts, is, and has been at all times referenced in the Charges, the holder of Connecticut RN license number 073716.
2. In paragraph 2 of the Charges, the Department alleges that during approximately May 2019, Respondent abused or utilized to excess alcohol.
3. In paragraph 3 of the Charges, the Department alleges that Respondent's abuse of alcohol does, and/or may, affect his practice as a registered nurse.
4. In paragraph 4 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to § 20-99(b) of the Statutes, including, but not limited to § 20-99(b)(5).

***Count Two***

5. In paragraph 5 of the Charges, the Department alleges that paragraphs 1 through 4 are incorporated herein by reference as if set forth in full.
6. In paragraph 6 of the Charges, the Department alleges that on October 17, 2018, the Board issued a Memorandum of Decision in Petition Number 2017-1504 ("the Memorandum") that placed Respondent's RN license on probation for a period of four years effective November 1, 2018. Such disciplinary action was based upon proof of Respondent's abuse of alcohol and violation of the terms of probation contained in the Consent Order in Petition Number 2017-236.
7. In paragraph 7 of the Charges, the Department alleges that said Memorandum specifically provided in Paragraph 1/L(1) that "Respondent must submit to observed, random chain of custody urine screens for alcohol and drugs for the entire probationary period; in Paragraph 1.L(3) that "There must be at least one such observed, random alcohol/drug screen on a weekly basis during the entire probationary period; and in Paragraph 1.M. that "Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for him for a legitimate purpose by a licensed health care practitioner authorized to prescribe medications."
8. In paragraph 8 of the Charges, the Department alleges that on or about May 2, 2019, May 3, 2019, May 7, 2019, May 15, 2019, May 23, 2019, and/or May 28, 2019, Respondent did not submit to urine screens when called to do so by his screening monitor.
9. In paragraph 9 of the Charges, the Department alleges that Respondent's conduct, as described above, constitutes violation of the terms of probation as set forth in the Memorandum and subjects Respondent's license to revocation or other disciplinary action authorized by §§ 19a-17 and 20-99(b) of the Statutes.

***Findings of Fact***

1. Respondent, residing in Feeding Hills, Massachusetts, is, and has been at all times referenced in the Charges, the holder of Connecticut RN license number 073716. Tr., p. 5.
2. During approximately May 2019, Respondent abused or utilized to excess alcohol. Tr., p. 5.
3. Respondent's abuse of alcohol does, and/or may, affect his practice as a registered nurse. Tr., p. 5.
4. On October 17, 2018, the Board issued a Memorandum of Decision in Petition Number 2017-1504 ("the Memorandum") that placed Respondent's RN license on probation for a period of four years effective November 1, 2018. Such disciplinary action was based upon a finding made by the Board that the Respondent had abused alcohol and violated the terms of probation contained in the Consent Order in Petition Number 2017-236. Tr., p. 6.
5. The Memorandum specifically provided in Paragraph 1/L(1) that, "Respondent must submit to observed, random chain of custody urine screens for alcohol and drugs for the entire probationary period. In Paragraph 1.L(3), the Memorandum specifically provided that, "There must be at least one such observed, random alcohol/drug screen on a weekly basis during the entire probationary period. The Memorandum further specifically provided in Paragraph 1.M. that, "Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for him for a legitimate purpose by a licensed health care practitioner authorized to prescribe medications." Tr., p. 6, 7.
6. On or about May 2, 2019, May 3, 2019, May 7, 2019, May 15, 2019, May 23, 2019, and/or May 28, 2019, Respondent did not submit to urine screens when called to do so by his screening monitor. Tr., p. 7.
7. On July 17, 2019, Respondent orally admitted the factual allegations in paragraphs one through 9. Tr., pp. 5-7.

***Discussion and Conclusions of Law***

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

The Department sustained its burden of proof with regard to all of the allegations contained in the Charges.

Conn. Gen. Stat. §20-99 provides, in pertinent part, 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: ... (5) abuse or excessive use of drugs, including alcohol, narcotics or chemicals; ...

Respondent admitted to all of the following allegations that were contained in the Charges: 1) In May 2019, Respondent abused or utilized alcohol to excess and that such abuse does, and/or may affect his practice as a registered nurse; 2) Respondent was issued the Memorandum that placed his RN license on probation for four years and was aware that the conditions of probation required him to submit to weekly observed, random alcohol/drug urine screens and prohibited him from using alcohol or any drug that was not prescribed for a legitimate purpose by a licensed health care practitioner authorized to prescribe medications; and, 3) Respondent failed to submit to urine screens on May 2, 3, 7, 15, 23 and 28, 2019. Tr., pp. 5-7. In addition to Respondent's admissions, the Charges are fully supported by the evidence submitted by the Department. Dept. Ex. 1.

The Board concludes that Respondent's conduct, as alleged in the Charges, as admitted to by Respondent, and as established by a preponderance of the evidence, constitutes grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b)(5). 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 073716 to practice as a registered nurse in the State of Connecticut is hereby REVOKED based on his abuse or utilization to excess of alcohol in May 2019.
2. Respondent's license number 073716 to practice as a registered nurse in the State of Connecticut is hereby REVOKED based on his failure to submit to urine screens on May 2, 3, 7, 15, 23, and 28, 2019 in compliance with the October 17, 2018 Memorandum.

3. This Memorandum of Decision becomes effective upon signature.

The Board of Examiners for Nursing hereby informs Respondent, Brian Gross, 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**

Laura Kisatsky, R.N.  
License No. E57105

Petition No. 2018-1416

**MEMORANDUM OF DECISION**

**I**

***Procedural Background***

On January 8, 2019, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board"). Board ("Bd.") Exhibit ("Ex.") 1. The Charges allege that Laura Kisatsky ("Respondent") violated Chapter 378 of the General Statutes of Connecticut ("Conn. Gen. Stat."). Such alleged violations would subject Respondent's registered nurse ("R.N.") license number E57105 to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b)(5).

On January 16, 2019, the Department filed a Motion for Summary Suspension with the Board. Bd. Ex. 2.

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

On January 17, 2019, the Department mailed the Summary Suspension Order, Charges, and Notice of Hearing ("Notice") to Respondent via certified and first class mail to Respondent's address of record on file with the Department (P.O. Box 12, Cornwall, CT 06753-0012). Bd. Ex. 4. On that same date, the correspondence was also sent to Respondent via her email address at [laurakissky@yahoo.com](mailto:laurakissky@yahoo.com). *Id.*

On January 23, 2019, Respondent picked up the original Summary Suspension Order, Charges and Notice from the United States Postal Office in Cornwall, CT. *Id.*

On February 1, 2019, Respondent requested a continuance of the hearing that was originally scheduled for March 6, 2019. On February 25, 2019, without objection from the

Department, the Board granted Respondent's request and continued the hearing to May 15, 2019. Bd. Ex. 5.

On March 7, 2019, the Department mailed to the parties a Memorandum of Decision and Order filed in Petition No. 2018-691. Bd. Ex. 8. During that timeframe, the Summary Suspension Order dated January 16, 2019, regarding Charges filed against Respondent in Petition No. 2018-1416, remained in effect. *Id.*

On April 10, 2019, the Department received Respondent's Answer to the Charges which was dated April 5, 2019 ("Answer"). Bd. Ex. 3.

On May 13, 2019, the Department filed a Motion to Continue the May 15, 2019 hearing because the parties had reached a settlement agreement regarding the above-captioned matter, Petition No. 2018-1416. Bd. Ex. 6. On May 14, 2019, the Board continued the May 15, 2019 hearing to the June 19, 2019 monthly meeting in order to permit the Board an opportunity to consider the parties' proposed Consent Order. *Id.*

On June 3, 2019, Respondent requested that the Department proceed with a hearing in Petition No. 2018-1416.

On June 28, 2019, in response to the Respondent's request for a hearing, the Department mailed a Notice of Rescheduled Hearing to the parties. The rescheduled hearing was set for July 17, 2019. Bd. Ex. 7.

The rescheduled hearing was held on July 17, 2019. Respondent appeared at the hearing with her attorney, Mary Alice Moore Leonhardt. Attorney Joelle Newton represented the Department.

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*

In paragraphs 1 and 6 of the Charges, the Department alleges that Respondent of Cornwall, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number E57105.

***Count One***

2. In paragraph 2 of the Charges, the Department alleges that on October 1, 2014, Respondent entered into a Reinstatement Consent Order in Petition No. 2014-35 (“Reinstatement Order”) based on her use and diversion of controlled substances in 2004. The Reinstatement Order, in part, placed her license on probation for four years and required her (a) to submit to random urine screens, all of which must be negative; and, (b) prohibited [her from] obtaining and/or using controlled substances or alcohol.
3. In paragraph 3 of the Charges, the Department alleges that on or about December 5, 2018, Respondent abused and/or utilized alcohol to excess [while] under the terms of the Reinstatement Order.
4. In paragraph 4 of the Charges, the Department alleges that Respondent’s abuse and/or excessive use of alcohol does, and/or may, affect her practice of nursing.
5. In paragraph 5 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to Conn. Gen. Stat. § 20-99(b), including but not limited to § 20-99(b)(5).

***Count Two***

7. In paragraph 7 of the Charges, the Department alleges that on or about December 6, 2018, Respondent’s urine screen tested positive for alcohol.
8. In paragraph 8 of the Charges, the Department alleges Respondent’s conduct as described above constitutes a violation of the terms of probation required by the Reinstatement Order, and subjects Respondent’s license to revocation or other disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

**III**

***Findings of Fact***

1. Respondent of Cornwall, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number E57105. Bd. Ex. 3.
2. On October 1, 2014, Respondent entered into a Reinstatement Order. Respondent had voluntarily surrendered her R.N. license on January 31, 2005 in response to Petition No. 2005-0105-010-003 which had been filed as a result of Respondent’s use and diversion of controlled substances in 2004. The Reinstatement Order included many terms and conditions, including, but not limited to, placing Respondent’s R.N. license on probation for four years and requiring her to submit to random urine screens, all of which were required to be negative. The Reinstatement Order also prohibited Respondent from obtaining and/or using controlled substances or alcohol. Bd. Ex. 3; Department (“Dept.”) Ex. 1, p. 1 (under seal); Dept. Ex. 1, pp. 13-25.

3. 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. Bd. Ex. 3; Respondent (“Resp.”) Ex. 1, pp. 1-3; Dept. Ex. 1, p. 1 (under seal); Transcript (“Tr.”), pp. 19-22.
4. On December 6, 2018, Respondent’s urine screen tested positive for alcohol. Bd. Ex. 3; Dept. Ex. 1, pp. 1, 3, 4, 8 (under seal); Tr. pp. 19-22.
5. Respondent’s abuse and/or excessive use of alcohol does, and/or may, affect her practice as a nurse. Tr. pp. 24-25, 29-30.

## V

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

With respect to the allegations contained in the Charges, Respondent admitted to the allegations contained the paragraphs 1, 2, 6 and 7 of Charges, but denied the allegations contained in paragraphs 3, 4, 5, and 8 of the Charges. Bd. Ex. 3. Despite Respondent’s denials in her Answer, the Board finds that the Department sustained its burden of proof with respect to all the allegations contained in the Charges. Findings of Fact (“FF”) 1-5.

The record establishes that Respondent had voluntarily surrendered her R.N. license on January 31, 2005 following the Department’s filing of Petition No. 2005-0105-010-003. The Department had filed said Petition as a result of Respondent’s use and diversion of controlled substances in 2004. Subsequently, Respondent filed a Motion to Reinstate her R.N. license. On October 1, 2014, Respondent entered into a Reinstatement Order. The Reinstatement Order contained many terms and conditions including, but not limited to placing her R.N. license on

probation for four years and requiring her to submit to random urine screens, all of which were required to be negative. The Reinstatement Order also prohibited her from obtaining and/or using controlled substances or alcohol. FF 2.

The record further establishes, and Respondent admits, that on December 5, 2018, Respondent abused and/or utilized alcohol to excess under the terms of the Reinstatement Order (FF 3) and on December 6, 2018, Respondent's urine screen tested positive for alcohol. FF 4.

At the hearing, Respondent testified about her relapse. She stated that following her relapse, she reevaluated what was missing in her recovery and what she needed to do to get back on track. Tr. pp. 20-21. She also credibly testified about her engagement in a more intensive relapse prevention program that includes substance abuse counseling, regular attendance, and participation in AA meetings. She further testified that she is maintaining a close relationship with her AA sponsor, developing better coping skills to improve her self-esteem, optimism, and level-headedness and increasing her community involvement. Tr. pp. 22-30. Respondent also submitted to the Board medical reports, meeting logs, and letters from her AA sponsor, family members, and friends that corroborate her recommitment to a clean and sober lifestyle. Resp. Ex. 1-2.

The record establishes that Respondent's use or abuse of alcohol on December 5, 2018 constitutes a violation of her Reinstatement Order, dated October 1, 2014, and Conn. Gen. Stat. § 20-99(b)(5), which prohibits the "abuse or excessive use of drugs, including alcohol, narcotics or chemicals." The conduct admitted, in conjunction with the Department 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). Nonetheless, based on the totality of the evidence, particularly evidence of Respondent's renewed efforts to remain clean and sober, the Board finds that Respondent can practice nursing with reasonable skill and safety under the terms of this Order.

## V

### *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(a)(1), (2) and (5) and 20-99(b)(5), the Board finds that the conduct alleged and proven is severable and warrants the disciplinary action imposed by this Order. **The terms of the March 6, 2019 Order with a**

**May 18, 2020 expiration date are replaced in their entirety by the terms of this Order which follow.** Therefore, the Board hereby orders, with respect to Respondent's license number E57105, as set forth below:

1. Probation of Respondent's license number E57105 shall be reinstated in accordance with the terms and conditions of the Order which initially was issued pursuant to Petition No. 2018-691, effective on March 6, 2019. Pursuant to Petition No. 2018-1416, the probation of Respondent's license will be extended until May 18, 2021. If any of the conditions of probation are not met, Respondent's R.N. license may be subject to disciplinary action pursuant to Conn. Gen. Stat. § 19a-17.
  - A. During the remainder of the probationary period, 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. If employed as a nurse, Respondent shall cause employer reports to be submitted to the Department by her immediate supervisor during the remainder of the 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 quarterly for the remainder of the second year and third year of the probationary period and monthly for the fourth year of the probationary period.
  - E. The employer reports cited in Paragraph D 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 P below.

- F. If Respondent's employment as a nurse is involuntarily terminated or suspended, Respondent and her employer shall notify the Department within 72 hours of such termination or suspension.
- G. 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 P below.
- H. At her expense, Respondent shall engage in therapy and counseling for chemical dependency with a licensed or certified therapist, approved by the Department, during the remainder of the probationary period.
- I. Respondent shall provide a copy of this Decision to her therapist. The Department shall be notified in writing by her therapist, within 30 days of the effective date of this Decision, as to receipt of a copy of this Decision.
- J. Respondent shall cause evaluation reports to be submitted to the Department by her therapist during the remainder of the probationary period. Therapist reports shall be submitted quarterly for the remainder of the second year and the third year of the probationary period and, monthly for the fourth year of probation.
- K. The therapist reports cited in Paragraph J 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. Therapist reports shall be submitted directly to the Department at the address cited in Paragraph P below.
- L. Observed random urine screens
  - (1) At her expense, Respondent shall be responsible for submitting to observed, random, chain of custody urine screens for alcohol and drugs for the entire probationary period at a testing facility approved by the Department. Random alcohol/drug screens shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening process.

- (2) Respondent shall be responsible for notifying the laboratory, her therapist, the Department and her prescribing practitioner of any drug(s) she is taking. For any prescription of a controlled substance(s) for more than two consecutive weeks, Respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department until such time as the controlled substance(s) are no longer prescribed.

The reports shall include the following:

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

- (3) There must be at least one such observed, random alcohol/drug screen on a *weekly* basis during the remainder 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 P below, by Respondent's therapist, personal physician or the testing laboratory.
- M. Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate purpose by a licensed health care practitioner authorized to prescribe medications. Respondent shall not abuse and/or excessively use any drugs that are prescribed for a legitimate medical purpose.
- N. Respondent is hereby advised that the ingestion of poppy seeds may produce a positive drug screen result indicating the presence of opiates/morphine. The ingestion of mouthwash, over the counter cough suppressants, and cold/flu remedies may produce a positive result indicating the presence of alcohol. For that reason, any food substance containing poppy seeds, mouthwash, and over the counter cough suppressants and cold/flu remedies should be avoided during the probationary period. In the event that a drug/alcohol screen is positive for opiates/morphine and/or alcohol, the ingestion of poppy seeds, mouthwash, and over the counter cough suppressants and/or cold/flu remedies shall not constitute a defense to such positive screen.
- O. The Department must be informed in writing prior to any change of address.
- P. All communications, payments if required, correspondence, and reports are to be addressed to:

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

- 2. Any deviation from the terms of probation, without prior written approval by the Board, shall constitute a violation of probation which will be cause for an immediate hearing on charges of violating this Order. Any finding that Respondent has violated this Order will

subject Respondent to sanctions under Conn. Gen. Stat. §§ 19a-17(a) and (c), including but not limited to, the revocation of her license. Any extension of time or grace period for reporting granted by the Board shall not be a waiver of 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, Laura Kisatsky, and the Department of this decision.

Dated at Hartford, Connecticut this \_\_\_\_\_ day of April, 2020.

BOARD OF EXAMINERS FOR NURSING

By \_\_\_\_\_  
Patricia C. Bouffard, D.N.Sc., Chair

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

Danielle K. Miranda, R.N.  
License No. 086494

Petition No. 2019-87

**MEMORANDUM OF DECISION**

*Procedural Background*

On June 6, 2019, the Department of Public Health ("Department") issued a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board") against Danielle K. Miranda, R.N. (the "Respondent"). Board Exhibit ("Bd. 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 license to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

On July 29, 2019, the Charges and a Notice of Hearing were sent to Respondent by both certified and first class mail. Bd. Exh. 2.

On August 15, 2019, Respondent filed an Answer to the Charges. Bd. Exh. 3.

The hearing was held on September 18, 2019. Respondent was present at the hearing and was represented by Attorney Mary Alice Moore Leonhardt. The Department was represented by Attorney Joelle Newton.

Each member of the Board involved in this decision attests that 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). To the extent the findings of fact actually represent conclusions of law, they should be so considered, and vice versa. *SAS Inst., Inc., v. S & H Computer Systems, Inc.*, 605 F. Supp. 816 (Md. Tenn. 1985).

*Allegations*

1. In paragraph one of the Charges, the Department alleges Respondent of North Haven, Connecticut is, and has been at all times referenced in the Charges, the holder of Connecticut registered nurse license number 086494.
2. In paragraph two of the Charges, the Department alleges that in or about the summer of 2016 and/or April 2018, Respondent abused and/or utilized to excess alcohol.

3. In paragraph three of the Charges, the Department alleges that in or about September 2016 and/or April 2018, Respondent abused and/or utilized to excess cocaine.
4. In paragraph four of the Charges, the Department alleges that in or about October 2017 and/or November 2018, Respondent abused and/or utilized to excess valium.
5. In paragraph five of the Charges, the Department alleges that Respondent's abuse of alcohol, cocaine, and/or valium does, and/or may, affect her practice as a nurse.
6. In paragraph six 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)(5).

### ***Findings of Fact***

1. Respondent is a resident of North Haven, Connecticut and has been, at all times referenced in the Charges, the holder of Connecticut registered nurse license number 086494. Bd. Ex. 3.
2. In August 2016 and April 2018, Respondent abused and/or utilized alcohol to excess. Bd. Ex. 3; Respondent Exhibit ("Resp. Ex.") 1, pp. 24 (sealed), 52; Department Exhibit ("Dept. Ex.") p. 14; Transcript ("Tr.") p. 11.
3. In or about September 2016 and April 2018, Respondent abused and/or utilized cocaine to excess. Bd. Ex. 3; Dept. Ex. 1, pp. 2, 4-6, 15, 21 (sealed); Tr., p. 11.
4. In or about October 2017 and November 2018, Respondent abused and/or utilized valium to excess. Bd. Ex. 3; Dept. Ex. 1, pp. 4, 6, 8, 13 (sealed); Tr., p. 11.
5. Respondent's abuse of alcohol, cocaine, and valium affected her practices as a nurse. Dept. Ex. 1, pp. 1, 2 (sealed), Resp. Ex. 1, pp. 1-3, 50-56, 59-62.

### ***Discussion and Conclusions of Law***

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

The Department sustained its burden of proof with regard to all allegations contained in the Charges.

Conn. Gen. Stat. Section 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 admits she ingested alcohol in August 2016 and April 2018, used cocaine in or about September 2016 and April 2018, and used valium in or about October 2017 and November 2018. Bd. Ex. 3. However, she denies that she abused or utilized those substances in excess and that such conduct affected her practice as a nurse. *Id.* Despite her claim, the Board finds by a preponderance of the evidence that Respondent utilized said substances to excess and that such excess use affected her practice as a nurse. Specifically, the credible evidence demonstrated that between May 18, 2016 and June 15, 2016, there were discrepancies with Respondent's drug pulls and wastes. Dept. Ex. 1, p. 1 (sealed); Tr., pp. 18, 19. Fentanyl and midazolam doses removed by Respondent from the Pyxis machine were unaccounted for and/or wasted without a witness. Dept. Ex. 1, p. 2 (sealed); Tr., pp. 18, 19. Subsequent to these incidents, Respondent sought help through rehabilitative services, therapy, and AA meetings. Thereafter, however, Respondent relapsed in April and November 2018. Bd. Ex. 3; Resp. Ex. 1, pp. 24 (sealed), 52; Dept. Ex. pp. 2, 4, 6, 7, 11, 13-15, 21 (sealed).

Pursuant to Conn. Gen. Stat. § 20-99(a), the Board is authorized to hold a hearing and discipline a nurse's license for failure to conform to the standards of the nursing profession. Respondent's abuse and/or excess utilization of alcohol, cocaine, and valium constitutes failure to conform to the standards of the nursing profession in violation of Conn. Gen. Stat. § 20-99(b)(5) and grounds for disciplinary action by the Board. However, such disciplinary action is not imposed without consideration of relevant and mitigating factors.

Respondent testified that since she relapsed in November 2018, she has stopped socializing with certain persons and has added different components of therapy to her treatment regimen. In addition, Respondent testified that she is submitting to weekly observed urine screens, utilizing coping skills, engaging with a sponsor, attending AA meetings, practicing yoga, maintaining a healthy diet, and hiking. Tr., pp. 11-13. Moreover, Respondent testified that her current employer supports her key access, and that the drugs she has access to in the Pyxis do not pose any temptation for her. Tr., pp. 14, 15.

Based on the foregoing, the Board finds that the Department sustained its burden of proof regarding all of the allegations set forth in the Charges and concludes that Respondent's conduct constitutes grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 20-99(b)(5) and 19a-

17.<sup>1</sup> Nonetheless, the Board finds that based on the relevant mitigating factors identified above, Respondent can practice nursing with reasonable skill and safety under the terms of the Order detailed below.

*Order*

1. Respondent's license shall be placed on probation for a period of four years under the following terms and conditions. If any of the conditions of probation are not met, Respondent's registered nurse license may be subject to disciplinary action pursuant to Conn. Gen. Stat. § 19a-17.
  - A. During the period of probation the Board 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 for the period of probation.
  - C. Respondent shall provide a copy of this Memorandum of Decision to any and all employers if employed as a nurse during the probationary period. The Board shall be notified in writing by any employer(s), within thirty (30) days of the commencement of employment, as to receipt of a copy of this Memorandum of Decision.
  - D. If employed as a nurse, Respondent shall cause employer reports to be submitted to the Board, by her 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 monthly during the first and fourth years of probation, and quarterly during the second and third years of probation.
  - E. The employer reports cited in Paragraph D above shall include documentation of Respondent's ability to safely and competently practice nursing. Employer reports shall be submitted directly to the Board at the address cited in Paragraph Q below.

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<sup>1</sup> Pursuant to Conn. Gen. Stat. § 19a-17, the Board may impose disciplinary action, as set forth in the statute, upon a finding of good cause.

- F. Should Respondent's employment as a nurse be involuntarily terminated or suspended, Respondent and her employer shall notify the Board within seventy-two (72) hours of such termination or suspension.
- G. If Respondent pursues further training in any subject area that is regulated by the Department, Respondent shall provide a copy of this Memorandum of 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 Memorandum of Decision within fifteen (15) days of receipt. Said notification shall be submitted directly to the Department at the address cited in Paragraph Q below.
- H. At her expense, Respondent shall engage in therapy and counseling for chemical dependency with a licensed or certified therapist, approved by the Board and the Department, during the entire period of probation.
- I. Respondent shall provide a copy of this Memorandum of Decision to her therapist. The Board shall be notified in writing by her therapist, within thirty (30) days of the effective date of this Decision, as to receipt of a copy of this Memorandum of Decision.
- J. Respondent shall cause evaluation reports to be submitted to the Board by her therapist during the entire probationary period. Therapist reports shall be submitted monthly during the first and fourth years of probation, and quarterly during the second and third years of probation.
- K. The therapist reports cited in Paragraph J above shall include documentation of dates of treatment, and an evaluation of Respondent's progress, including alcohol and drug free status. Therapist reports shall be submitted directly to the Board at the address cited in Paragraph Q below.
- L. Commencing on the effective date of this Memorandum of Decision, Respondent shall attend "anonymous" or support group meetings on an average of eight (8) to ten (10) times per month, and shall provide monthly reports to the Department concerning her record of attendance.

## M. Observed random urine screens

- (1) At her expense, Respondent shall be responsible for submitting to observed, random chain of custody urine screens for alcohol and drugs for the entire probationary period, at a testing facility approved by the Board, after consultation with the Department, as ordered by her therapist, and/or personal physician, and/or employer. Random alcohol/drug screens shall be legally defensible in that specimen donor and chain of custody can be identified throughout the screening process.
- (2) Respondent shall be responsible for notifying the laboratory, her therapist, the Board, the Department and her prescribing practitioner of any drug(s) she is taking. For any prescription of a controlled substance(s) for more than two consecutive weeks, Respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Board and 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 for Respondent;
  - b. A list of controlled substance(s) prescribed by other providers;
  - c. An evaluation of the Respondent's need for the controlled substance;
  - d. An assessment of the Respondent's continued need for the controlled substance(s).
- (3) There must be at one such observed random alcohol/drug screen per week during the first and fourth years of the probationary period; and, at least one such observed random alcohol/drug screens per month during the second and third years of the probationary period.
- (4) Random alcohol/drug screens shall be negative for the presence of alcohol and drugs. All positive *drug* screen results shall be confirmed by the Gas Chromatograph Mass Spectrometer (GC/MS) testing method. All positive *alcohol* screen results shall be confirmed by the urine Ethyl Glucuronide (EtG) 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)

- (6) Laboratory reports of random alcohol and drug screens shall be submitted directly to the Board and the Department, at the address cited in Paragraph R 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 her, for a legitimate purpose, by a licensed health care practitioner authorized to prescribe medications. Respondent shall not abuse and/or excessively use any drugs that are prescribed for a legitimate medical purpose.
- O. Respondent is hereby advised that the ingestion of poppy seeds may produce a positive drug screen result indicating the presence of opiates/morphine and that the ingestion of mouthwash may produce a positive result indicating the presence of alcohol. For that reason, any food substance containing poppy seeds, and mouthwash 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 and/or mouthwash shall not constitute a defense to such positive screen.
- P. The Board must be informed in writing prior to any change of address.

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

Lavita Sookram, Nurse Consultant  
Practitioner Monitoring and Compliance Unit  
Department of Public Health  
Healthcare Quality and Safety Branch  
410 Capitol Avenue, MS #12HSR  
P. O. Box 340308  
Hartford CT 06134-0308

- R. 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 § 19a-17(a) and (c) of the General Statutes of Connecticut, including but not limited to, the revocation of her license. Any extension of time or grace period for reporting granted by the Board shall not be a waiver or preclude the Board's right to take subsequent action. The Board shall not be required to grant future extensions of time or grace periods. Notice of revocation or other disciplinary action shall be sent to Respondent's address of record (most current address reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department).
2. This Memorandum of Decision becomes effective, and the four-year probation of registered nurse license no. 086494 shall commence, on the date of signature by the Board.

The Board of Examiners for Nursing hereby informs Respondent, Danielle Miranda, and the Department of Public Health of the State of Connecticut of this decision.

Dated at Hartford, Connecticut this \_\_\_\_\_ day of April, 2020.

BOARD OF EXAMINERS FOR NURSING

By \_\_\_\_\_  
Patricia Bouffard, D.N.Sc, Chairperson

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

Charlene Zikaras, R.N.  
License No. E43575

Petition No. 2019-522

**MEMORANDUM OF DECISION**

**I**

*Procedural Background*

On May 31, 2019, the Department of Public Health ("Department") filed a Motion for Summary Suspension ("Motion") with the Board of Examiners for Nursing ("Board"). Board ("Bd.") Exhibit ("Ex."). 1. The Statement of Charges ("Charges") alleges violations of Chapter 378 of the General Statutes of Connecticut ("Conn. Gen. Stat.") by Charlene Zikaras ("Respondent"), which would subject Respondent's registered nurse ("R.N.") license number E43575 to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

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

On June 19, 2019, the Charges, the Summary Suspension Order, and a Notice of Hearing ("Notice") were served to Respondent in person at the Board's June 19, 2019 meeting. Bd. Ex. 3, 4. The hearing was scheduled to convene on July 17, 2019. Bd. Ex. 4.

On July 16, 2019, Respondent requested a continuance of the July 17, 2019 hearing. Bd. Ex. 6. Without objection from the Department, the the Board granted Respondent's continuance request and continued the hearing to August 14, 2019. Bd. Ex. 6.

On August 14, 2019, Respondent was present at the hearing. She was not represented by counsel. Attorney Leslie Scoville represented the Department. During the hearing, Respondent answered the Charges on the record. Transcript ("Tr.") 8/14/19, pp. 19-22.

During the hearing, the Board determined that Respondent's treatment records were incomplete and therefore the Board could not review them in their entirety. As a result, the

Board voted to keep the record open until the next available hearing date and to continue the hearing to that date. Tr. 8/14/19, pp. 39-43.

On August 21, 2019, a Notice of Continued Hearing was sent to Respondent by first class mail and email transmission ([carubaz@aol.com](mailto:carubaz@aol.com)). The Notice of Continued hearing informed Respondent that the hearing was continued to September 18, 2019. Bd. Ex. 7.

On September 18, 2019, the hearing reconvened. Respondent was present at the hearing. Respondent was not represented by counsel. Attorney Matthew Antonetti represented the Department. Tr. 9/18/19, pp. 2-3.

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

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

## II

### *Allegations*

#### **Count One**

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Milford, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number E43575.
2. In paragraph 2 of the Charges, the Department alleges that in or about April 2019, Respondent abused or utilized alcohol to excess.
3. In paragraph 3 of the Charges, the Department alleges that Respondent's abuse of alcohol does, and/or may, affect her practice as a registered nurse.
4. In paragraph 4 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action pursuant to Conn. Gen. Stat. § 20-99(b), including but not limited to §§ 20-99(b)(2) and/or 20-99(b)(5).

#### **Count Two**

5. In paragraph 5 of the Charges, the Department alleges that paragraphs 1-3, inclusive, are incorporated herein by reference as if set forth in full.

6. In paragraph 6 of the Charges, the Department alleges that on December 19, 2018, the Board ordered a Consent Order in Petition Number 2018-265 that placed Respondent's R.N. license on probation for a period of four years. Such disciplinary action was based upon proof of Respondent's abuse or utilization of alcohol to excess.
7. In paragraph 7 of the Charges, the Department alleges that said Consent Order specifically provided that Respondent shall not use alcohol in any form unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications and that an EtG test report at a level of 1000 nanograms per milliliter ("ng/mL") or higher shall be deemed to constitute a positive screen for the presence of alcohol.
8. In paragraph 8 of the Charges, the Department alleges that on or about April 22, 2019, Respondent's urine screen test result was positive for metabolites of alcohol at a level of 4,878 ng/mL.
9. In paragraph 9 of the Charges, the Department alleges that said Consent Order specifically provided that in the event Respondent violates a term of the Consent Order, Respondent agrees, upon the Department's request, to immediately refrain from practicing as a nurse for a period not to exceed 45 days.
10. In paragraph 10 of the Charges, the Department alleges that on or about May 3, 2019, the Department requested Respondent to refrain from practicing as a nurse.
11. In paragraph 11 of the Charges, the Department alleges that on or about May 8, 2019, Respondent practiced as a R.N. at Stamford Ambulatory Surgical Center, Stamford, Connecticut.
12. In paragraph 12 of the Charges, the Department alleges that Respondent's conduct as described above constitutes violations of the terms of probation as set forth in the Consent Order, and subjects Respondent's license to revocation or other disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

### III

#### *Findings of Fact*

1. Respondent, a resident of Milford, Connecticut, is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number E43575. Tr. 8/14/19, p. 19.
2. In April 2019, Respondent abused or utilized alcohol to excess. Tr. 8/14/19, p. 20.
3. Respondent's abuse of alcohol does, and/or may, affect her practice as a registered nurse. Tr. 8/14/19, pp. 20-21.

4. On December 19, 2018, the Board issued a Consent Order in Petition Number 2018-265 that placed Respondent's R.N. license on probation for a period of four years. Such disciplinary action was based upon proof of Respondent's abuse or utilization of alcohol to excess. Tr. 8/14/19, p. 20; Department ("Dept.") Ex. 1, pp. 2, 4.
5. Said Consent Order specifically provided that Respondent shall not use alcohol in any form unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications. The Consent Order further specified that an EtG test report indicating the presence of alcohol at a level of 1000 ng/mL or higher shall be deemed to constitute a positive screen for the presence of alcohol. Tr. 8/14/19, p. 21; Dept. Ex. 1, p. 4.
6. On April 22, 2019, Respondent's urine screen test result was positive for metabolites of alcohol at a level of 4,878 ng/mL. Tr. 8/14/19, p. 21; Dept. Ex. 1, pp. 2, 4.
7. Said Consent Order specifically provided that in the event Respondent violates a term of the Consent Order, upon the Department's request, Respondent agrees to immediately refrain from practicing as a nurse for a period not to exceed 45 days. Tr. 8/14/19, p. 21; Dept. Ex. 1, pp. 4, 14.
8. On May 3, 2019, as a result of Respondent's April 22, 2019 positive alcohol screen, the Department requested Respondent to refrain from practicing as a nurse. Tr. 8/14/19, p. 22; Bd. Ex. 5; Dept. Ex. 1, pp. 2, 4.
9. On May 8, 2019, Respondent practiced as a R.N. at Stamford Ambulatory Surgical Center, Stamford, Connecticut. Tr. 8/14/19, p. 22; Dept. Ex. 1, p. 3.

#### 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 as to all of the allegations contained in the Charges.

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

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

negligence in carrying out usual nursing functions; ... (5) abuse or excessive use of drugs, including alcohol, narcotics or chemicals; ...

Respondent admitted to each of the allegations contained in the Charges. Thus, the Board finds that with respect to each of the allegations contained in the Charges, the Department sustained its burden of proof by a preponderance of the evidence. Findings of Fact (“FF”) 1-9.

The record establishes that on December 19, 2018, the Board issued a Consent Order in Petition Number 2018-265 that placed Respondent’s R.N. license on probation for a period of four years. Such disciplinary action was based upon proof of Respondent’s abuse or utilization of alcohol to excess. FF 4. Said Consent Order specifically provided that Respondent shall not use alcohol in any form unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications. The Consent Order also specifically provided that an EtG test report indicating the presence of alcohol at a level of 1000 ng/mL or higher shall be deemed to constitute a positive screen for the presence of alcohol. FF 5.

The record further establishes that in April 2019, Respondent abused or utilized alcohol to excess (FF 2) and on April 22, 2019, Respondent’s urine screen test result was positive for metabolites of alcohol at a level of 4,878 ng/mL, which was a violation of the December 19, 2018 Consent Order. FF 6, 7. Said Consent Order specifically provided that in the event Respondent violates a term of the Consent Order, upon the Department’s request, Respondent agrees to immediately refrain from practicing as a nurse for a period not to exceed 45 days. FF 7.

The record also establishes, and Respondent admits, that on May 3, 2019, the Department requested by email and first class mail that she refrain from practicing as a nurse (FF 8), in accordance with paragraph number 10 of the December 29, 2018 Consent Order. *See*, Dept. Ex. 1, p. 14. Respondent did not comply with the Department’s request that she refrain from practicing as a nurse. The record establishes, and Respondent admits, that on May 8, 2019, Respondent reported for work at Stamford Ambulatory Surgical Center, Stamford, Connecticut and practiced as a R.N. FF 9. Respondent, in her correspondence (Bd. Ex. 5) and in her testimony, stated that she had intended to inform her employer in person about the Department’s request, but she was too anxious and “overwhelmed with fear and confusion” to do as instructed. Tr. 9/18/19, p. 17.

The record establishes that on May 8, 2019, the Department's monitor telephoned Respondent's employer and learned that Respondent had not informed her employer of the Department's May 3, 2019 request that Respondent refrain from practicing as a nurse for a period of time, not to exceed 45 days. In addition, the Department learned that on May 8, 2019, Respondent worked from 7:00 a.m. until 10:00 a.m., providing patient care. Dept. Ex. 1, pp. 3, 32. After Respondent's employer notified her that the Department monitor had called them regarding Respondent's violation of the Consent Order, Respondent was relieved of her nursing duties and was asked to leave the premises. Dept. Ex. 1, p. 33. Respondent acknowledged that rather than reporting for work as usual on May 8, 2019, she should have informed her employer of the Department's May 3, 2019 request that she refrain from the practice of nursing for a period of time, not to exceed 45 days. Bd. Ex. 5.

As a result of Respondent's failure to comply with the Department's request to refrain from practice, the Board summarily suspended her R.N. license on June 19, 2019. Bd. Ex. 2.

Based on the foregoing, the Board finds that the Department has established by a preponderance of the evidence that Respondent violated one of the terms of the December 19, 2018 Consent Order when she failed to comply with the Department's request to refrain from practice for 45 days, and that such violation constitutes grounds for disciplinary action pursuant to Conn. Gen. Stat. §§ 20-99(b)(2) and (b)(5). The conduct admitted, in conjunction with the Department's sustaining of 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). Nonetheless, based on Respondent's commitment to her sobriety, use of positive coping mechanisms, daily attendance at AA meetings (Dept. Ex. 2, pp. 113-119, Respondent ("Resp.") Ex. 1, pp. 3-6), performance of leadership duties at AA meetings and conferences, engagement and participation in individual and group counseling (Dept. Ex. 1, pp. 46-58, under seal; Dept. Ex. 2, pp. 66-98, under seal), recent completion of an intensive outpatient program (Resp. Ex. 1, p. 2), negative urine screens (Dept. Ex. 2, pp. 3-62, 121-132, under seal), positive employer reports (Dept. Ex. 1, pp. 39-43, under seal, Dept. Ex. 2, pp. 99-111, under seal) and support from her AA sponsor and AA community, the Board finds that Respondent can practice nursing with reasonable skill and safety under the terms of this Order.

***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(a)(1), (2) and (5) and 20-99(b)(5), the Board finds that the conduct alleged and proven is severable and warrants the disciplinary action imposed by this Order. **The terms of the December 19, 2018 Order are replaced in their entirety by the terms of this Order which follow.** Therefore, the Board hereby orders, with respect to Respondent's license number E43575, as follows:

1. Respondent shall pay a civil penalty of \$200 by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check and shall be payable within 30 days of the effective date of this Memorandum of Decision ("Decision").
2. Respondent's license shall be suspended for a period of three months.
3. Concurrently with such suspension, Respondent's license shall be placed on probation for a period of four years under the following terms and conditions. If any of the conditions of probation are not met, Respondent's R.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. If employed as a nurse, Respondent shall cause employer reports to be submitted to the Department by her 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 and fourth years of the

probationary period and at least quarterly for the second and third years of the probationary period.

- E. The employer reports cited in Paragraph D 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 P below.
- F. Should Respondent's employment as a nurse be involuntarily terminated or suspended, Respondent and her employer shall notify the Department within 72 hours of such termination or suspension.
- G. 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 P below.
- H. At her expense, Respondent shall engage in therapy and counseling for chemical dependency with a licensed or certified therapist, approved by the Department, during the entire probationary period. Additionally, Respondent shall obtain a sponsor and participate in AA meetings at least 10 times a month for the entire probationary period and shall submit written documentation of her participation and/or attendance to the Department.
- I. Respondent shall provide a copy of this Decision to her therapist. The Department shall be notified in writing by her therapist, within 30 days of the effective date of this Decision, as to receipt of a copy of this Decision.
- J. Respondent shall cause evaluation reports to be submitted to the Department by her therapist during the entire probationary period. Therapist reports shall be submitted at least monthly for the first and fourth years of the probationary period and at least quarterly for the second and third years of the probationary period.
- K. The therapist reports cited in Paragraph J 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.

Therapist reports shall be submitted directly to the Department at the address cited in Paragraph P below.

L. Observed random urine screens

- (1) At her expense, Respondent shall be responsible for submitting to observed, random, chain of custody urine screens for alcohol and drugs for the entire probationary period at a testing facility approved by the Department. Random alcohol/drug screens shall be legally defensible in that specimen donor and chain of custody can be identified throughout the screening process.
- (2) Respondent shall be responsible for notifying the laboratory, her therapist, the Department, and her prescribing practitioner of any drug(s) she is taking. For any prescription of a controlled substance(s) for more than two consecutive weeks, Respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department until such time as the controlled substance(s) is (are ) no longer prescribed. The reports shall include the following:
  - a. A list of controlled substances prescribed by their provider;
  - b. A list of controlled substance(s) prescribed by other providers;
  - c. An evaluation of Respondent's need for the controlled substance; and
  - d. An assessment of Respondent's continued need for the controlled substance(s).
- (3) There must be at least one such observed, random alcohol/drug screen on a weekly basis during the first and fourth years of the probationary period; and at least monthly during the second and third years 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 P below by Respondent's therapist, personal physician, or the testing laboratory.

- M. Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate purpose by a licensed health care practitioner authorized to prescribe medications. Respondent shall not abuse and/or excessively use any drugs that are prescribed for a legitimate medical purpose.
- N. Respondent is hereby advised that the ingestion of poppy seeds may produce a positive drug screen result indicating the presence of opiates/morphine. The ingestion of mouthwash, over the counter cough suppressants and cold/flu remedies may produce a positive result indicating the presence of alcohol. For that reason, any food substance containing poppy seeds, mouthwash and over the counter cough suppressants and cold/flu remedies should be avoided during the probationary period. In the event that a drug/alcohol screen is positive for opiates/morphine and/or alcohol, the ingestion of poppy seeds, mouthwash and over the counter cough suppressants and/or cold/flu remedies shall not constitute a defense to such positive screen.
- O. The Department must be informed in writing prior to any change of address.

- P. 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

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

Dated at Hartford, Connecticut this \_\_\_\_\_ day of April, 2020.

BOARD OF EXAMINERS FOR NURSING

By \_\_\_\_\_  
Patricia C. Bouffard, D.N.Sc., Chair

## SUMMARY SUSPENSION COVER SHEET

In Re: Heather Spaulding, R.N.

Petition No. 2019-1224

1. Heather Spaulding of Norwich, Connecticut (hereinafter "respondent") graduated from Three Rivers Community Technical College and was licensed to practice nursing in 2003.
2. On or about November 17, 2018, respondent abused and/or utilized to Xanax.
3. In 2018, 2019 and 2020 respondent was diagnosed with an emotional disorder and/or mental illness ("diagnosis").
4. Respondent's diagnosis and/or abuse and/or excessive use of Xanax does, and/or may, affect her practice of nursing.
5. For the foregoing reasons, the Department believes that respondent's continued nursing practice represents a clear and immediate danger to the public health and safety. The Department respectfully requests that the Board summarily suspend respondent's nursing license until a full hearing on the merits can be held.

***CONFIDENTIALITY NOTICE: This document and all attachments may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition. Thank you.***

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

In re: Heather Spaulding, R.N.

Petition No. 2019-1224

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

Dated at Hartford, Connecticut this 13<sup>th</sup> day of March, 2020.



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

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

In re: Heather Spaulding, R.N.

Petition No. 2019-1224

**STATEMENT OF CHARGES**

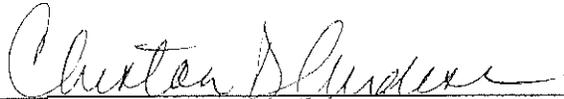
Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Heather Spaulding:

1. Heather Spaulding of Norwich, Connecticut (hereinafter "respondent") is the holder of Connecticut registered nursing license number 072000.
2. On or about November 17, 2018, respondent abused and/or utilized to Xanax.
3. In 2018, 2019 and 2020 respondent was diagnosed with an emotional disorder and/or mental illness ("diagnosis").
4. Respondent's diagnosis and/or abuse and/or excessive use of Xanax 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
  - a. §20-99(b)(4) and/or
  - b. §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 13<sup>th</sup> day of March 2020.

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

## CONSENT ORDER COVER SHEET

In re: Carissa Kelly, R.N.  
Carissa Kelly, A.P.R.N.

Petition No. 2019-1025  
Petition No. 2019-1023

1. Carissa Kelly of Sharon, Massachusetts (hereinafter “respondent”) graduated from Villanova University and was licensed to practice as a registered nurse in Connecticut in 2005. She graduated from Stony Brook University and was licensed to practice as an Advance Practice Registered Nurse in Connecticut in 2010. (“Connecticut Nursing Licenses”). She has not been subject to any other discipline in Connecticut.
2. Respondent is licensed as a Registered Nurse and Certified Nurse Practitioner in Massachusetts. (“Massachusetts Nursing Licenses”).
3. On or about September 19, 2019, the Massachusetts Board of Registration of Nursing (hereinafter “Massachusetts Board”) issued a Consent Agreement for Voluntary Surrender for her Massachusetts Nursing Licenses in Docket Number 2018-0170 (hereinafter “Massachusetts Order”). The Massachusetts Order included respondent’s admission that during May 2017 through May 2018, she ordered “durable medical equipment supplies for hundreds of patients without the benefit of a physical exam, review of prior records/scans, and follow-up evaluations”. A copy of the Massachusetts Order is attached to the Consent Order and marked “Attachment A”.
4. On or about October 9, 2019, the Massachusetts Board reinstated respondent’s Massachusetts licenses to “current unrestricted status”.
5. The proposed Consent Order places a reprimand on respondent’s Connecticut Nursing Licenses.
6. The Department and respondent respectfully request the Board to accept the proposed Consent Order.

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

In re: Carissa Kelly, R.N.  
Carissa Kelly, A.P.R.N.

Petition No. 2019-1025  
Petition No. 2019-1023

**CONSENT ORDER**

WHEREAS, Carissa Kelly (hereinafter "respondent") of Sharon, Massachusetts has been issued Connecticut Registered Nurse license number 152845 and Connecticut Advance Practice Registered Nurse license number 007947 (hereinafter "Connecticut Nursing Licenses") by the Department of Public Health (hereinafter "the Connecticut Department") pursuant to Connecticut General Statutes, Chapter 378.

WHEREAS, respondent has been issued Massachusetts Registered Nurse and Certified Nurse Practitioner license number RN/CNP276785 (hereinafter "Massachusetts Nursing Licenses") by the Massachusetts Department of Public Health (hereinafter "the Massachusetts Department").

WHEREAS, respondent admits:

1. On or about September 19, 2019, the Massachusetts Board of Registration of Nursing (hereinafter "Massachusetts Board") issued a Consent Agreement for Voluntary Surrender in Docket Number 2018-0170, a disciplinary proceeding regarding respondent's Massachusetts nursing licenses (hereinafter "Massachusetts Order"). The Massachusetts Order included respondent's admission that during May 2017 through May 2018, she ordered "durable medical equipment supplies for hundreds of patients without the benefit of a physical exam, review of prior records/scans, and follow-up evaluations". A true and accurate copy of the Massachusetts Order is attached and marked "Attachment A" and incorporated herein.

2. On or about October 9, 2019, the Massachusetts Board reinstated respondent's Massachusetts licenses to "current unrestricted status".
3. The above-described facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §§19a-17(f) and/or §20-99(b), including but not limited to §20-99(b)(5).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above admitted violations at a hearing in front of the Connecticut Board of Examiners for Nursing (hereinafter "Connecticut Board"). Respondent further agrees that this Consent Order shall have the same effect as if ordered after a full hearing pursuant to Connecticut General Statutes §§19a-10, 19a-14, and 20-99.

NOW THEREFORE, pursuant to Connecticut General Statutes §§19a-17, 19a-14, and 20-99(a) respondent hereby stipulates and agrees to the following:

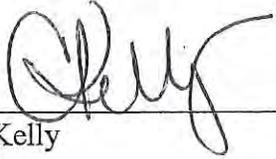
1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations applicable to her profession.
3. Respondent's Connecticut Nursing Licenses are hereby reprimanded.
4. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.
5. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Connecticut Board.
6. Respondent understands this Consent Order is a public record.

7. Respondent understands this Consent Order shall be deemed as evidence of the above admitted violations in any proceeding before the Connecticut Board in which (1) her compliance with this same Consent Order is at issue, or (2) her compliance with Connecticut General Statutes §20-99, as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank and the Healthcare Integrity and Practitioner Data Bank maintained by the United States Department of Health and Human Services.
8. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent understands that this Consent Order shall not be subject to modification as a result of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review under the provisions of Connecticut General Statutes, Chapters 54 and 368a, provided that this stipulation shall not deprive respondent of any other rights that respondent may have under the laws of the State of Connecticut or of the United States.
9. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Connecticut Board. The Department and respondent understand that the Connecticut Board has complete and final discretion as to whether an executed Consent Order is approved or accepted. Respondent hereby waives any claim of error that could be raised that is related to or arises during the course of the Connecticut Board's discussions regarding whether to approve or reject this Consent Order and/or a Connecticut Board member's participation during this process, through the Connecticut Board member's review or comments, including but not limited to bias or reliance on evidence

outside the administrative record if this matter proceeds to a hearing on a Statement of Charges resulting in a proposed decision and/or final decision by the Connecticut Board.

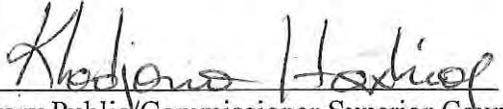
10. This Consent Order is a revocable offer of settlement, which may be modified by mutual agreement or withdrawn by the Connecticut Department at any time prior to its being executed by the last signatory.
11. Respondent has had the opportunity to consult with an attorney prior to signing this document.
12. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only, and is not intended to affect any civil or criminal liability or defense.
13. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this Consent Order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

I, Carissa Kelly, have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

  
\_\_\_\_\_  
Carissa Kelly

Subscribed and sworn to before me this 27 day of January, 2020.



  
\_\_\_\_\_  
Notary Public/Commissioner Superior Court

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 3<sup>rd</sup> day of February, 2020, it is hereby accepted.

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

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the \_\_\_\_\_ day of \_\_\_\_\_, 2020, it is hereby ordered and accepted.

BY: \_\_\_\_\_  
Connecticut Board of Examiners for Nursing



CHARLES D. BAKER  
Governor

KARYN E. POLITO  
Lieutenant Governor

The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
Bureau of Health Professions Licensure  
Board of Registration of Nursing  
239 Causeway Street, Suite 500, Boston, MA 02114

MARYLOU SUDDERS  
Secretary

MONICA BHAREL, MD, MPH  
Commissioner

Tel: 617-973-0900  
Fax: 617-973-0984  
TTY: 617-973-0988  
[www.mass.gov/dph/boards/rn](http://www.mass.gov/dph/boards/rn)

September 9, 2019

Sent Via First Class & Certified Mail No. 7019 0700 0000 1934 7196,

Return Receipt Requested

Ingrid S. Martin, Esq.  
Todd & Weld, LLP  
One Federal Street  
Boston, MA 02110

RE: In the Matter of Carissa Kelly,  
Docket Nos. NUR-2018-0170  
License Nos. RN/CNP276785

Dear Attorney Martin:

Please find enclosed a fully executed **Consent Agreement for Surrender, effective September 9, 2019**. This agreement constitutes full and final disposition of the above-referenced complaint.

Please note that as of September 9, 2019, Ms. Kelly's license status was changed to **Voluntary Surrender**. The Board acknowledges that your client has met the requirements for license reinstatement specified in the Agreement. Accordingly, her license status will be changed to current unrestricted status, effective **October 9, 2019**.

You may contact me at (617) 973 - 0950 with any questions that you may have concerning this Agreement.

Sincerely,

Olajumoke Atueyi, Esq.  
Board Counsel  
Board of Registration in Nursing

Enclosure

# EXHIBIT A

## COMMONWEALTH OF MASSACHUSETTS

SUFFOLK COUNTY

BOARD OF REGISTRATION  
IN NURSING

In the Matter of  
Carissa M. Kelly  
License No. RN/CNP276785  
Expire 12/31/2020

Docket No. NUR-2018-0170

### CONSENT AGREEMENT FOR VOLUNTARY SURRENDER

The Massachusetts Board of Registration in Nursing (Board) and Carissa M. Kelly (Licensee), a Registered Nurse (RN) and Certified Nurse Practitioner (CNP) licensed/authorized by the Board, License No. RN/CNP276785 do hereby stipulate and agree that the following information shall be entered into and become a permanent part of the Licensee's record maintained by the Board:

1. The Licensee acknowledges that a complaint has been filed with the Board against her Massachusetts Registered Nurse license and Certified Nurse Practitioner authorization (license<sup>1</sup>) related to the conduct set forth in paragraph 2, identified as Docket No. NUR-2018-0170 (Complaint).
2. The Licensee admits that while maintaining a valid Registered Nurse license and Certified Nurse Practitioner authorization during or about May 2017 through May 2018, she ordered DME supplies for hundreds of patients without the benefit of a physical exam, review of prior records/scans, and follow-up evaluations. The Licensee acknowledges that her conduct constitutes failure to comply with the Board's Standards of Conduct at 244 Code of Massachusetts Regulations (CMR) 9.03(5), (7), (32), (47) and warrants disciplinary action by the Board under Massachusetts General Laws (G.L.) Chapter 112, section 61.
3. The Licensee agrees to **SURRENDER** her RN license and CNP authorization and right to renew said license/authorization for no less than thirty (30) days commencing with the date on which the Board signs this Agreement (Effective Date).

<sup>1</sup> The term "license" applies to both a current license and the right to renew an expired license.

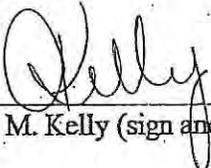
4. The Board acknowledges that the Licensee has completed the following requirements:
- a. Evidence of completion of all continuing education required by Board regulations for the two (2) renewal cycles immediately preceding the date on which the Licensee submits her petition ("petition date");
  - b. A performance evaluation sent directly to the Board from each of the Licensee's employers, prepared on official letterhead that reviews the Licensee's attendance, general reliability, and specific job performance during the year immediately prior to the petition date<sup>2</sup>.
  - c. Written verification sent directly to the Board from each of the Licensee's medical care providers, which meets the requirements set forth in Attachment B1;
  - d. Authorization for the Board to obtain a Criminal Offender Record Information (CORI) report of the Licensee conducted by the Massachusetts Department of Criminal Justice Information Services.
  - e. Documentation that the Licensee has completed, at least one (1) year prior to the petition date, all requirements imposed upon her in connection with all criminal and/or administrative matter(s) arising from, or related to, the conduct identified in Paragraph 2<sup>3</sup>. Such documentation shall be certified and sent directly to the Board by the appropriate court or administrative body and shall include a description of the requirements and the disposition of each matter.
  - f. Certified documentation from the state board of nursing of each jurisdiction in which the Licensee has ever been licensed to practice as a nurse, sent directly to the Massachusetts Board identifying her license status and discipline history, and verifying that her nursing license is, or is eligible to be, in good standing and free of any restrictions or conditions.
  - g. Submit an affidavit satisfactory to the Board, attesting that Licensee read, understands and complies with regulations regarding the Scope of Practice of an Advanced Practice Nurse.

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<sup>2</sup> If the Licensee has not been employed during the year immediately prior to the petition date, Licensee shall submit an affidavit to the Board so attesting:

<sup>3</sup> If there have been no criminal or administrative matters against the Licensee arising from or in any way related to the conduct identified in Paragraph 2, the Licensee shall submit an affidavit so attesting:

5. The Licensee agrees that she will not practice as a Registered Nurse or Certified Nurse Practitioner in Massachusetts from the Effective Date unless and until the Board reinstates her license/authorization<sup>4</sup>.
6. The Board agrees that in return for the Licensee's execution of this Agreement it will not prosecute the complaint.
7. The Licensee understands that she has a right to formal adjudicatory hearing concerning the allegations against her and that during said adjudication she would possess the right to confront and cross-examine witnesses, to call witnesses, to present evidence, to testify on her own behalf, to contest the allegations, to present oral argument, to appeal to the courts, and all other rights as set forth in the Massachusetts Administrative Procedures Act, G. L. c. 30A, and the Standard Adjudicatory Rules of Practice and Procedure, 801 CMR 1.01 *et seq.* The Licensee further understands that by executing this Agreement she is knowingly and voluntarily waiving her right to a formal adjudication of the complaints.
8. The Licensee acknowledges that she has been at all times free to seek and use legal counsel in connection with the complaint and this Agreement.
9. The Licensee acknowledges that after the Effective Date, the Agreement constitutes a public record of disciplinary action by the Board. The Board may forward a copy of this Agreement to other licensing boards, law enforcement entities, and other individuals or entities as required or permitted by law.
10. The Licensee certifies that she has read this Agreement. The Licensee understands and agrees that entering into this Agreement is a final act and not subject to reconsideration, appeal or judicial review.

 8/29/19  
\_\_\_\_\_  
Carissa M. Kelly (sign and date)

<sup>4</sup> The Licensee understands that practice as a Registered Nurse/ Certified Nurse Practitioner includes, but is not limited to, seeking and/or accepting a paid or voluntary position as a Registered Nurse/ Certified Nurse Practitioner or a paid or voluntary position requiring that the applicant hold a current Registered Nurse/ Certified Nurse Practitioner license. The Licensee further understands that if she accepts a voluntary or paid position as a Registered Nurse/ Certified Nurse Practitioner or engages in any practice of nursing after the Effective Date and before the Board formally reinstates her license, evidence of such practice shall be grounds for the Board's referral of any such unlicensed practice to the appropriate law enforcement authorities for prosecution, as set forth in G. L. c. 112, ss. 65 and 80.

Eoin Kelly  
Witness Print

[Signature] 8/29/19  
Witness (sign and date)

[Signature]  
Lorena M. Silva, MSN-L, MBA, DNP, RN  
Executive Director  
Board of Registration in Nursing

September 9th, 2019  
Effective Date of Agreement

Fully Signed Agreement Sent to Licensee on 9/9/19 by Certified

Mail No. 7019 0700 0000 1934 7196

CONSENT ORDER COVER SHEET

1. Kimberly Smith of Watertown, Connecticut graduated from New England Technical Institute at New Britain and was licensed to practice nursing in 2005.  
  
She has not been previously disciplined.
2. In April 2019 was the subject of a Drug Control Investigation while she was working at Countryside Manor of Bristol (“facility”) in Bristol, Connecticut.
3. The investigation revealed that from December 2018 through April 2019, oxycodone, Tylenol #3, tramadol, clonazepam and/or Percocet were being diverted from the facility.
4. Respondent admitted to diverting the controlled substances. She states she did so because her boyfriend forced her and threatened to beat her to “a bloody pulp” if she refused.
5. Respondent agreed to undergo a substance abuse evaluation. Respondent attended the first of two appointments. The evaluator was unable to determine whether respondent had a substance abuse problem because she failed to attend her second appointment.
6. The Department and respondent respectfully request the Board to review the attached documents and make a recommendation how to proceed with this petition.

## CONSENT ORDER COVER SHEET

In re: Milagros Narido, R.N.

Petition No. 2019-1055

1. Milagros Narido of Glastonbury, Connecticut (hereinafter “respondent”) graduated from Perpetual Health College of Manila, Philippines in 1995. She was licensed to practice as a registered nurse in Connecticut in 2006.  
She has not been subject to any other discipline.
2. On various occasions in 2017, respondent practiced beyond the scope of her registered nurse license when she inappropriately signed prescriptions using the names of various physicians without their knowledge or authorization. Respondent also identified herself as a “Doctor of Nursing Practice” when she did not hold such degree.
3. The proposed Consent Order places respondent's Connecticut registered nurse license hereby on probation for three months and requires her to attend and successfully complete coursework in Scope of Practice for Nursing. Respondent further agrees to cease and desist signing prescriptions using the names of various physicians without their knowledge or authorization and to cease and desist identifying herself as a “Doctor of Nursing Practice” until she receives said degree.
4. The Department and respondent, through her counsel, respectfully request the Board to accept the proposed Consent Order.

*Please note: Due to issues with COVID 19 and document access, the attached documents were unable to be redacted.*

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

In re: Milagros Narido, R.N.

Petition No. 2019-1055

**CONSENT ORDER**

WHEREAS, Milagros Narido (hereinafter "respondent") of Glastonbury, Connecticut, has been issued license number 080179 to practice as a registered nurse by the Connecticut Department of Public Health (hereinafter "the Department") pursuant to Connecticut General Statutes, Chapter 378, as amended.

WHEREAS, the Department alleges:

1. Milagros Narido of Glastonbury, Connecticut is, and has been at all times referenced, the holder of Connecticut registered nurse license number 080179.
2. On various occasions in 2017, respondent practiced beyond the scope of her registered nurse license when she inappropriately signed prescriptions using the names of various physicians without their knowledge or authorization. Respondent also identified herself as a "Doctor of Nursing Practice" when she did not hold such degree.
3. The above facts constitute grounds for disciplinary action pursuant Connecticut General Statutes §20-99(b), including but not limited to §20-99(b)(2).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above allegations at a hearing before the Connecticut State Board of Examiners for Nursing (hereinafter

"the Board"). Respondent agrees that for the purpose of this or any future proceedings before the Board this Consent Order shall have the same effect as if ordered after a full hearing pursuant to Connecticut General Statutes §§19a-9, 19a-10, and 20-99(a).

NOW THEREFORE, pursuant to Connecticut General Statutes §§19a-17 and 20-99(a), respondent hereby stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent's Connecticut registered nurse number 080179 is hereby reprimanded.
3. Respondent agrees to cease and desist signing prescriptions using the names of various physicians without their knowledge or authorization. Respondent also agrees to cease and desist identifying herself as a "Doctor of Nursing Practice" until she receives said degree.
4. Respondent's Connecticut registered nurse number 080179 hereby placed on probation for three months, subject to the following terms and conditions:
  - A. Respondent shall attend and successfully complete coursework in Scope of Practice for Nursing. Within fourteen (14) days of the completion of said coursework, respondent shall provide the Department with proof, to the Department's satisfaction, of the successful completion of said coursework. In the event respondent successfully completes said coursework to the Department's satisfaction prior to the three month term of probation, respondent's probation shall terminate.
5. Respondent shall comply with all federal and state statutes and regulations applicable to her profession.
6. Respondent shall provide a copy of this Consent Order to all current and future employers.

7. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.
8. Respondent shall notify the Department of any change in respondent's home or business address within fifteen (15) days of such change.
9. If respondent pursues further training or is engaged at the time of the implementation of the Consent Order, in an educational program in any subject area that is regulated by the Department, respondent shall provide a copy of this Consent Order to the educational institution or, if not an institution, to respondent's instructor. Such institution or instructor shall notify the Department of receipt of the Consent Order within fifteen (15) days of receipt.
10. All correspondence and reports shall be addressed to:

Lavita Sookram, R.N., Nurse Consultant  
Practitioner Compliance and Monitoring Unit  
Department of Public Health  
410 Capitol Avenue, MS #12HSR  
P.O. Box 340308  
Hartford, CT 06134-0308

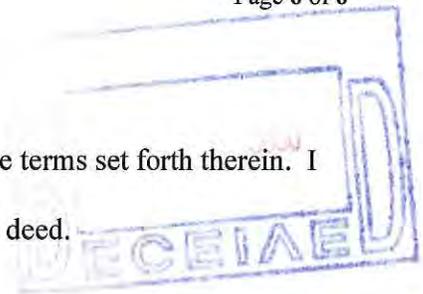
11. Any violation of the terms of this Consent Order without prior written approval by the Department shall constitute grounds for the Department to seek revocation of respondent's nursing license following notice and an opportunity to be heard. Respondent shall pay all costs necessary to comply with this Consent Order.
12. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to take action at a later time. The Department shall not be required to grant future extensions of time or grace periods.

13. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.
14. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.
15. Respondent understands this Consent Order is a public record.
16. Respondent consulted with her attorney prior to signing this document.
17. Respondent understands and agrees that this Consent Order shall be deemed as evidence of the above-admitted violations in any proceeding before the Board in which (1) respondent's compliance with this same Consent Order is at issue, or (2) respondent's compliance with Connecticut General Statutes §20-99(b), as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank maintained by the United States Department of Health and Human Services.
18. In the event respondent violates a term of this Consent Order, respondent agrees immediately to refrain from practicing as a nurse, upon request by the Department, for a period not to exceed 45 days. During that time period, respondent further agrees to cooperate with the Department in its investigation of the violation, and to submit to and complete a medical, psychiatric or psychological evaluation, if requested to do so by the Department; and, that the results of the evaluation shall be submitted directly to the Department. Respondent further agrees that failure to cooperate with the Department in its investigation during said 45 day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that failure to

cooperate with the Department's investigation shall be considered by the Board and shall be given due weight by the Board in determining whether respondent's conduct constitutes a clear and immediate danger as required pursuant to Connecticut General Statutes §§4-182(c) and 19a-17(c). The Department and respondent understand that the Board has complete and final discretion as to whether a summary suspension is ordered.

19. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this Consent Order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

I, Milagros Narido, have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.



Milagros Narido  
Milagros Narido

Subscribed and sworn to before me this 18 day of March, 2020.



My Commission Expires  
May 15, 2021

[Signature]  
Notary Public/Commissioner Superior Court

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 9th day of April, 2020, it is hereby accepted.

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

The above Consent Order having been presented to the duly appointed agent of the Connecticut State Board of Examiners for Nursing on the \_\_\_\_\_ day of \_\_\_\_\_, 2020, it is hereby ordered and accepted.

BY: \_\_\_\_\_  
Connecticut State Board of Examiners for Nursing