

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**DANNA M. POWELL (DAVIS), R.N.**  
License No. RN.65521

OIE # 2008-310

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing, hereinafter referred to as the Board, will consider the Report of its Disciplinary Panel in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 1:00 p.m.** in **Room 108**, Kingstree Building, 110 Centerview Drive, Columbia, South Carolina. The Panel's Report, together with the transcript of the testimony taken and the exhibits in evidence before the Panel, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Report for the purpose of determining its action thereon. The Board can accept the Report in its entirety, modify the findings in the report, or make a new determination based on the information provided at the hearing. The Respondent and/or her counsel shall have the right to appear before the Board at said hearing and to submit briefs and be heard in oral argument in opposition to or in support of the recommendations of the Panel.

BY: \_\_\_\_\_

  
JOCELYN T. ANDINO  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

02 / 18 / 10

\*Hearing times are subject to change

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING, AND  
REGULATION  
BEFORE THE SOUTH CAROLINA STATE BOARD OF NURSING (Board)**

In the Matter of:

**Danna M. Powell (Davis), R.N.**

License No. 65521

Respondent.

**DISCIPLINARY PANEL REPORT**

OIE No. 2008-310

This matter came before the Board's Disciplinary Panel of Nursing (the Panel) for hearing on September 29, 2009. The Notice and Complaint, and the Notice of Panel Hearing were sent to the Respondent via certified mail on or about June 18, 2009. A quorum of Panel members was present. The Panel found that the State was diligent in attempting service and decided to proceed with the hearing.

The hearing was held pursuant to §1-23-310, §40-33-10 *et seq.*, and §40-33-110 *et seq.* of the South Carolina Code of Laws Ann. (1976, as amended) to determine whether sanctions should be imposed. The Respondent did not appear and was not represented by counsel. Jocelyn T. Andino, Assistant General Counsel, represented the State.

The Respondent was charged with violations of §40-1-110(f) and §40-33-110 (A)(1) of the South Carolina Code of Laws Ann. (1976, as amended).

**FINDINGS OF FACT**

Based upon the preponderance of the evidence on the whole record, the Panel finds the facts of the case to be as follows:

1. The Respondent is a duly licensed Registered Nurse to practice in South Carolina, and was so licensed at all times relevant to the issues asserted in this case and is subject to the jurisdiction of the Panel.
2. The State presented evidence and testimony that on or about June 6, 2008, the Respondent, while employed with the Fountain Inn Nursing Home, was requested to submit to a drug screen along with the other nurses on duty due to some missing Lortab. The Respondent tested positive for amphetamines and methamphetamines, not Lortab. The Respondent was subsequently terminated.

3. The Board issued an Order of Temporary Suspension on November 5, 2008. The Order of Temporary Suspension was personally served on the Respondent on or about November 20, 2008.
4. The State presented evidence and testimony that the Respondent enrolled with the Recovering Professional Program (RPP) on or about November 7, 2008 and was referred to Cornerstone for an alcohol & drug evaluation. The Respondent was also referred to AccuDiagnostics for a hair test. RPP discharged the Respondent on December 22, 2008 for noncompliance for failure to obtain the evaluation and hair test.
5. The State presented evidence and testimony that the Respondent re-enrolled with RPP on or about February 24, 2009, and obtained an evaluation from Cornerstone. The Respondent did not respond to RPP communications on several occasions and missed numerous treatment sessions. RPP discharged the Respondent on or about June 16, 2009.
6. Should a finding of fact constitute a conclusion of law, or *vice versa*, it is adopted as such and directed that it be treated accordingly.

#### CONCLUSIONS OF LAW

Based upon careful consideration of the facts in this matter, the Panel finds and concludes as a matter of law that:

1. The Panel has jurisdiction in this matter and, upon finding that a licensee has violated any of the provisions of § 40-33-110 *et seq.* the South Carolina Code of Laws Ann. (1976, as amended), has the authority to cancel, fine, suspend, revoke, issue a public reprimand or private reprimand, or restrict, including probation or other reasonable action, such as requiring additional education and training, the authorization to practice of a person who has engaged in misconduct.
2. The Respondent violated §40-1-110(f) and §40-33-110 (A)(1) of the South Carolina Code of Laws Ann. (1976, as amended) by committing an unethical act that violated a federal, state, or local law by testing positive for amphetamines and methamphetamines. The Board may receive such evidence to reach an independent conclusion in making an administrative decision regarding discipline. A conviction is not required.
3. The sanction(s) imposed is designed not to punish the Respondent, but to protect the life, health, and welfare of the public at large.

#### RECOMMENDATION (S)

The Panel, based upon the Findings of Fact and Conclusions of Law as indicated above, recommends:

1. The continued suspension of the Respondent's license until such time as she petitions and appears before the Board.

2. The Respondent must comply with any sanctions or restrictions that may be placed upon the Respondent's license by the Board.

**SOUTH CAROLINA  
DISCIPLINARY PANEL OF NURSING**

BY: Pat Godbold  
Pat Godbold  
Panel Chairperson

Nov 29, 2009.

**CERTIFICATE OF SERVICE BY MAIL**

This is to certify that the undersigned has this date served this DPR of the above entitled matter upon all parties to this cause by depositing a copy thereof in the United States mail postage paid on the Interstate Mail Service addressed to the party last mentioned at the following address: 20 Opalbe Dr. Hartsville, SC 29139

BY: Shirley Ann Adams  
Shirley Ann Adams, Secretary



**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

In the Matter of:

**DANNA M. POWELL (DAVIS), R.N.**  
License No. 65521

OIE #2008-310

Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice of Final Order Hearing and copy of Disciplinary Report** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Ms. Danna M. Powell (Davis)

6351 Riverfork Road  
Waterloo, SC 29384-3100

20 Apache Drive  
Waterloo, SC 29384

SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING & REGULATION

*Krystal J McFadden*  
Krystal J McFadden  
Administrative Assistant

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Street, Apt or PO Box	[REDACTED]		
City, State	[REDACTED]		
PS Form 3800, August 2005		See Reverse for Instructions	

STATE OF SOUTH CAROLINA  
DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE BOARD OF NURSING

IN THE MATTER OF	)	
	)	
DANNA M. POWELL (DAVIS), RN	)	
LICENSE NO. RN.65521	)	
	)	PANEL HEARING
	)	
2008-310	)	
	)	
RESPONDENT.	)	

Given before Jennifer S. Angooraj, Professional Verbatim Court Reporter and Notary Public in and for the State of South Carolina, commencing at the hour of 10:16 a.m. on Tuesday, September 29, 2009, at the offices of the South Carolina Department of Labor, Licensing and Regulation, 110 Centerview Drive, Columbia, South Carolina.

Reported by:  
Jennifer S. Angooraj

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A P P E A R A N C E S

Panel Members: Pat Godbold, RN, BSN, MN (Chair)  
Patricia Johnson, RN, MSN, COO  
Karen DiLorenzo-Thames, MSN, RN,  
CAPA, CCRN, BC-NE

For the State: Jocelyn T. Andino, Esquire  
SC Department of Labor, Licensing &  
Regulation/Office of General Counsel  
110 Centerview Drive  
Post Office Box 11329  
Columbia, SC 29211-1329

Advice Counsel: Gwendolyn Green, Esquire

Reported by: Jennifer S. Angooraj



PROCEEDINGS

1  
2 MS. GODBOLD: This is the hearing of the South  
3 Carolina Department of Labor, Licensing and  
4 Regulation Board of Nursing versus Danna M.  
5 Powell Davis being held in Columbia, South  
6 Carolina this 29th day of September 2009. The  
7 Complaint and Notice of Hearing was served to  
8 the Respondent's last known address by  
9 certified mail on June 18th, 2009 and returned  
10 unclaimed on July 9th, 2009. All of these  
11 documents are in the Board's file and made a  
12 part of the record. My name is Pat Godbold  
13 and I am the designated chairperson for this  
14 hearing. The other members of the Nursing  
15 Board Panel hearing on this case are Patricia  
16 Johnson and Karen Thames. The attorney  
17 advising the Board is Gwen Thomas (sic). The  
18 Respondent is not present. The State is  
19 represented by Jocelyn T. Andino, legal  
20 counsel for the South Carolina Department of  
21 Labor, Licensing, and Regulation. This  
22 hearing will be conducted as informally as is  
23 compatible with an equitable presentation of  
24 both sides of the case and in compliance with  
25 the provisions of the South Carolina

1 Administrative Procedure Act and the Nursing  
2 Board Rules and Regulation. The Panel will  
3 hear testimony and receive evidence and shall  
4 then make a report of the proceedings before  
5 it including its findings of fact, conclusions  
6 of law, and recommendations and shall file the  
7 same with the Secretary of the Board within 60  
8 days of this hearing. Ms. Andino.

9 OPENING REMARKS FOR THE STATE BY

10 MS. ANDINO: Okay. This is the matter of Ms. Danna  
11 Powell, registered nurse with license number  
12 65521 and OIE case number 2008-310. We're  
13 here today based on information and belief  
14 that Ms. Powell has conducted herself in a way  
15 that has violated the Nurse Practice Act and  
16 the South Carolina Code of Laws.  
17 Specifically, the State is alleging that on  
18 June 6th, 2008, while she was working at  
19 Fountain Inn Nursing Home, she was requested  
20 to submit to a drug screen by her employer and  
21 she tested positive for amphetamines and  
22 methamphetamines. On November 5th, 2008, the  
23 Board issued an Order temporarily suspending  
24 her license to practice nursing in this State,  
25 and Ms. Powell was personally served with that

1 order on November 20th, 2008. In addition,  
2 the State is alleging that on February 24th,  
3 2009, Ms. Powell enrolled with the South  
4 Carolina Recovering Professional Program. She  
5 was referred to Cornerstone and was evaluated  
6 and diagnosed with methamphetamine dependence.  
7 Therefore, the State has alleged that due to  
8 those acts Ms. Powell has violated Section 40-  
9 33-110 (A)(1) and Section 40-1-110 (f) of the  
10 South Carolina Code of Laws.

11 MS. GODBOLD: Thank you. Do you want to call your  
12 first witness?

13 MS. GREEN: I have one question. What was the OI -  
14 - OGC number, please?

15 MS. ANDINO: They're going, they're doing away with  
16 OGC numbers, so the newer ones just have OIE  
17 numbers.

18 MS. GREEN: Okay. Thank you.

19 MS. ANDINO: Yep. I'd like to go ahead and make a  
20 part of the record State's Exhibit Number 1,  
21 just the Notice of Hearing, the Formal  
22 Complaint, and the Certificate of Service  
23 showing that Ms. Powell was properly served  
24 and she did receive notice of this hearing  
25 today.

1 (Whereupon, the Notice of Hearing, the  
2 Notice, the Formal Complaint, and the  
3 Certificate of Service, consisting of 6  
4 pages, is marked as the State's Exhibit  
5 Number 1 for identification.)

6 MS. GODBOLD: Thank you. It's accepted.

7 MS. ANDINO: At this time, I would call the State's  
8 first witness, Investigator Ron Cook.

9 Whereupon,

10 Investigator Ronald W. Cook, Sr., is duly sworn and  
11 cautioned to speak the truth, the whole truth, and  
12 nothing but the truth.

13 DIRECT EXAMINATION OF INVESTIGATOR COOK BY MS. ANDINO:

14 Q. Mr. Cook, please state your full name for the  
15 record.

16 A. Ronald William Cook, Sr.

17 Q. Mr. Cook, where are you currently employed?

18 A. I am the Drug Diversion Coordinator for the Office  
19 of Investigations and Enforcement at the South  
20 Carolina Department of Labor, Licensing and  
21 Regulation.

22 Q. And as the Drug Diversion Coordinator, what, what  
23 are those duties that you have?

24 A. I supervise and coordinate the investigation of  
25 complaints involving alcohol and drugs for the

1           medical boards under the South Carolina Department  
2           of Labor, Licensing and Regulation.

3           Q.    And how long have you been an investigator here at  
4           LLR?

5           A.    At LLR since 2003.

6           Q.    Okay. Did you investigate a matter involving Ms.  
7           Danna Powell Davis?

8           A.    Yes, ma'am.

9           Q.    And was this investigation initiated pursuant to a  
10          complaint, which is the requirement by law?

11          A.    It was.

12          Q.    And briefly, what was the issue behind that  
13          complaint?

14          A.    Need to qualify that just a little bit. I -- this  
15          complaint came in before the Drug Diversion Unit  
16          was formed and it was assigned to a previous  
17          investigator by the name of Mr. Patsolic. That  
18          investigation came in from Ms. Powell Davis's  
19          employer where she had been suspected of diversion  
20          of controlled substances. She was subjected for a  
21          for-cause drug screen which was returned positive  
22          for amphetamines and methamphetamines.

23          Q.    Okay. And just going back you said that initially  
24          when the complaint came in it was assigned to a  
25          different investigator?

1 A. That's correct.

2 Q. Can you state the investigator's name again,  
3 please?

4 A. Michael Patsolic.

5 Q. And is he, is he still employed with LLR? Is he  
6 still employed with -- okay.

7 A. No, ma'am. He resigned and sought employment out-  
8 of-state.

9 Q. Okay. Let me show you what the State's going to  
10 mark as Exhibit 2 and ask you if you can tell me if  
11 that, that's what you were able to review during,  
12 during your investigation of this case.

13 (Whereupon, the Drug Test Record of Danna  
14 M. Powell Davis, consisting of 3 pages,  
15 is marked as the State's Exhibit Number 2  
16 for identification.)

17 Q. Mr. Cook, are these the records you reviewed during  
18 your investigation?

19 A. Yes, ma'am. These records were in the file when it  
20 was assigned to me. These records and documents  
21 had been received from the complainant, Ms. Helga  
22 Longino, when she submitted her Formal Complaint.

23 Q. And are these the only -- is this the only  
24 information you have regarding the drug test?

25 A. Yes, ma'am.

1 Q. Okay. And based on, on, on this record, which is  
2 the State's Exhibit 2, was this the drug test for  
3 Ms. Danna Powell Davis?

4 A. It was Danna Powell at the time. Sometime during  
5 this investigation she allegedly married and  
6 changed her name to Davis, but she never formally  
7 notified the Board of Nursing.

8 Q. And can you tell me what date the drug test was  
9 conducted based on, on this Exhibit?

10 A. This was on June the 6th of 2008.

11 Q. Okay. And what were the results of the drug test?

12 A. The results was positive for amphetamine and  
13 positive for methamphetamine.

14 Q. And was this drug test verified by a medical review  
15 officer?

16 A. It was. It was verified by Dr. Christopher J.  
17 Rubel, R-U-B-E-L, medical doctor, on June the 18th  
18 of 2008.

19 Q. Okay. And do you know just from when you received  
20 the file, after it being previously assigned to  
21 another investigator, do you know if that previous  
22 investigator, Mr. Patsolic, if he had an  
23 opportunity to contact Ms. Powell?

24 A. According to the investigative log, Mr. Patsolic  
25 was assigned this investigation on June the 24th.

1 From June the 24th until August the 12th, Mr.  
2 Patsolic made a number of telephone calls, he sent  
3 a regular mail notification to her and a certified  
4 mail notification to her requesting that she  
5 contact him. During that period of time, he did  
6 not receive any response from her. He did receive  
7 a response from her on August the 12th, at which  
8 time she consented to an interview on August the  
9 18th in Greenwood.

10 Q. And do you know if he was actually able to meet  
11 with her on that date?

12 A. According to his log, he met with her at McDonald's  
13 in Greenwood and discussed the complaint, which is  
14 our normal practice. Also, her opportunity to  
15 respond to that complaint, present her side of the  
16 story with a written statement ---

17 Q. Uh-huh.

18 A. --- and also to refer her to the Recovering  
19 Professional Program for the purpose of obtaining  
20 an evaluation assessment to determine if she was  
21 safe to continue practicing as a nurse and if she  
22 had dependency. And if she had a dependency, to  
23 what level and what resources she would need to  
24 address that dependency in order to get her back to  
25 where she would be safe to continue practicing as a

1 nurse in South Carolina.

2 Q. And after that meeting which you said was August  
3 18th 2008, do you know if he was able to meet with  
4 her again at another point?

5 A. He was not. He, according to his log, he never  
6 received anything from her and she never contacted  
7 RPP to enroll to have this evaluation assessment  
8 conducted.

9 Q. And when were you able to first make contact with  
10 Ms. Powell?

11 A. This investigation was assigned to me on September  
12 the 9th, at which time I reviewed it and determined  
13 the allegations and what Mr. Patsolic had done up  
14 to that point. I began trying to locate Ms.  
15 Powell. And that's when I learned that she was, at  
16 that time, using the last name of Davis, allegedly  
17 having married or remarried and was using the name  
18 of Davis.

19 Q. So you, you were able to contact her by phone or  
20 were you able to meet her in person?

21 A. I initially started calling the numbers in the file  
22 that she had provided to the Board of Nursing.

23 Q. Uh-huh.

24 A. And I received a answer on one occasion from a male  
25 who identified himself as her son. And he's the

1           one that told me she had married and was living at  
2           another residence, another telephone number with  
3           her sister. I began calling that number. And on  
4           several occasions, it was answered by a male voice  
5           mail which identified it as a residence of someone  
6           else. I left numerous messages there and never  
7           received a response to my messages. I tried to  
8           call the son back to determine where that residence  
9           was so that I could go there and maybe make  
10          personal contact. I was never able to contact him  
11          back at the previous number. Continuing to call  
12          that number, I eventually got an unidentified male  
13          to answer the phone and he acknowledged that Ms.  
14          Davis was there. I asked to speak with her and as  
15          soon -- I could hear whispering in the background  
16          because I told him who I was. And as soon as he  
17          told her it was someone from the Board of Nursing  
18          calling, the phone went dead.

19          MS. GREEN: Please Madam, Madam Chairperson, may I  
20                speak? This is all hearsay and if, if, if the  
21                person was here, if the Respondent was here,  
22                you know it would be inadmissible. And so I  
23                would suggest that if he had, if you have some  
24                direct testimony ---

25          Q.     And I'll direct the witness.

1 MS. GREEN: --- and please.

2 Q. Mr. Cook, if you can just answer the question just  
3 specifically that I ask you without going into  
4 detail as to what you may have been told or, or  
5 what ---

6 A. Okay.

7 Q. --- may have been said to you. Were you ever able  
8 to speak personally with Ms. Powell?

9 A. Yes, ma'am.

10 Q. Did you schedule times to meet with her?

11 A. I attempted on several occasions to schedule  
12 meetings with her. We scheduled meetings and she  
13 would never show up, never call. She did make some  
14 calls after work hours to the main number of our  
15 office leaving excuses why she couldn't be here.

16 Q. Were you ever able to meet with her personally?

17 A. I did eventually make contact with her.

18 Q. And on what day was that?

19 A. Excuse me just a moment. Let me refer to the  
20 notes.

21 Q. Uh-huh.

22 A. That was on November the 21st.

23 Q. When you met with her personally?

24 A. That was when I contacted her. Established contact  
25 to schedule a meeting with her. She had had a

1 meeting with ---

2 Q. Did you -- let me just ask you. Did you -- in  
3 2009, did you meet Ms. Powell personally in order  
4 to be able to discuss the pending disciplinary  
5 matters against her?

6 A. Yes, ma'am. I did.

7 Q. And do you recall the date of that meeting? And if  
8 you don't recall the exact date, that's fine.

9 A. I have it in my file here.

10 Q. That's okay. We can, we can move along. Just, do  
11 you recall if Ms. Powell ever submitted to you a  
12 written statement regarding the allegations against  
13 her?

14 A. No, she did not. And ---

15 Q. Okay.

16 A. --- in the latter part of 2009, she went to RPP to  
17 meet with Mr. McCoy.

18 Q. Okay. And we'll, we'll -- I'm, I'm, I'm going to  
19 get to, to RPP. You're referring to RPP. Is it  
20 normal practice for the investigators at LLR to  
21 coordinate closely with RPP, which is the  
22 Recovering Professional Program?

23 A. Yes, ma'am.

24 Q. And is -- was this such a case that you guys  
25 communicated with one another? You being you and

1 RPP?

2 A. Yes, ma'am.

3 Q. Okay. Let me show you what I'm going to mark as  
4 State's Exhibit Number 3.

5 (Whereupon, the Order of Temporary  
6 Suspension, consisting of 2 pages, is  
7 marked as the State's Exhibit Number 3  
8 for identification.)

9 Q. This is a, as you know, a Board-issued Order. Can  
10 you tell me, can you identify what this is, please?

11 A. Yes, ma'am.

12 Q. And what is it?

13 A. This is an Order of Temporary Suspension that was  
14 issued by the Board of Nursing, signed by president  
15 of the Board, Ms. Brenda Yates Martin, based on an  
16 Affidavit that I submitted to our Office of General  
17 Counsel requesting that this Order be issued.

18 Q. And what is, what is the date of that Order?

19 A. November the 5th of 2008.

20 Q. And was that Order of Temporary Suspension  
21 personally served on Ms. Powell?

22 A. It was personally served by Investigator Thomas  
23 Byrd on November the 20th.

24 Q. And to your knowledge, just very briefly, for what  
25 reasons would you say the Board usually issues

1           these types of Orders suspending a nurse's license  
2           to practice?

3           A.    When there is a concern for public safety.

4           Q.    Okay.  I don't have any further questions.  Please  
5           answer any questions the Panel may have.

6   EXAMINATION OF INVESTIGATOR COOK BY THE PANEL:

7           MS. GODBOLD: Do you have any questions?

8           MS. JOHNSON: Pardon me.  You did actually  
9                   physically speak with her sometime in 2009, I  
10           mean, face to face?

11          A.    In August, in August of 2009.  Yes, ma'am.

12          MS. GREEN: I'm, I'm sorry.  He, he said 2008  
13                   before.  Is it 2008 or 2009?  I'm sorry.

14          A.    I finally met with her here in August of 2009.  I  
15           spoke with her by telephone in '08.

16          MS. GREEN: Gotcha.

17          MS. JOHNSON: Right.  11/21 you spoke to her on the  
18                   phone?

19          MS. GREEN: Gotcha.

20          MS. JOHNSON: Okay.

21          A.    Yes, ma'am.

22          MS. JOHNSON: So in August of 2009, you -- there  
23                   has actually been some physical see-her/speak-  
24                   to-her contact?

25          A.    She called me and wanted to know how she could get

1 her license back, and I explained the procedure.  
2 She had to go to RPP. When she finished there, she  
3 needed to come here and discuss the procedures with  
4 me, which she did. She came here to the Office of  
5 Investigations and met with me after she left RPP  
6 meeting with Mr. McCoy a second time.

7 MS. JOHNSON: Okay.

8 A. First time she met with him she had an appointment  
9 with me, she failed to stop here, she went back  
10 home.

11 MS. JOHNSON: Okay.

12 MS. GODBOLD: Anything else? No further questions.

13 MS. ANDINO: Okay. The State's second witness is  
14 Helga Longino. Let me just get her. The  
15 court reporter's going to swear you in.

16 Whereupon,

17 Helga Longino is duly sworn and cautioned to speak  
18 the truth, the whole truth, and nothing but the  
19 truth.

20 COURT REPORTER: Will you please state your full  
21 name for the record?

22 MS. LONGINO: Helga Longino.

23 COURT REPORTER: Please spell your last name.

24 MS. LONGINO: Last name L-O-N-G-I-N-O.

25 COURT REPORTER: Thank you.

1 DIRECT EXAMINATION OF MS. LONGINO BY MS. ANDINO:

2 Q. Ms. Longino, where are you currently employed?

3 A. At Fountain Inn Nursing and Rehabilitation Center.

4 Q. Okay. And what are your duties there?

5 A. I am the Director of Nursing Services.

6 Q. And how long have you been the director there?

7 A. Since 1995.

8 Q. And as a, as the director of Fountain Inn Nursing  
9 Home, is your office located within the nursing  
10 home or is it in a separate area?

11 A. It's within the facility.

12 Q. Okay. Was Ms. Danna Powell Davis ever employed at  
13 Fountain Inn Nursing Home?

14 A. Yes, ma'am.

15 Q. And how long was she employed with you guys?

16 A. For approximately a year or a little longer.

17 Q. Okay. Can you give me the time frame of her  
18 employment?

19 A. It's from June 7th, '07, I think. Hold on, I've  
20 got that. From June 7th of 2007 through June 18th,  
21 2008.

22 Q. Okay. And what shifts did Ms. Powell normally  
23 work?

24 A. At the time of her termination, she was working my  
25 weekend Baylor shift.

1 Q. Okay. And do you recall Ms. Powell submitting to a  
2 drug test while employed at Fountain Inn back in  
3 June? Specifically, June 6th of 2008?

4 A. Yes, ma'am.

5 Q. And what was the reason for requiring her to submit  
6 to a drug test at that time?

7 A. We had had some, some medication, Loritabs that had  
8 come missing out of our med cart. And as part of  
9 our investigation -- talking to corporate, we  
10 decided to -- a time period from, I think it was  
11 like a Thursday through the Monday, any nurses that  
12 had worked on those carts, we requested that they  
13 go do -- have a drug test done as part of our  
14 investigation.

15 Q. Okay. So Ms. Powell, was she the only employee  
16 asked to submit to a drug test?

17 A. No, ma'am. All, all the nurses, which I think was  
18 approximately seven nurses.

19 Q. And those nurses that were asked to submit, those  
20 were the nurses that had access to the medication  
21 cart?

22 A. Yes, ma'am.

23 Q. Okay. And you said that you guys discovered that  
24 there was some medications missing and that's what  
25 prompted the drug test. Was that discovery on the

1 same day as the drug test?

2 A. We -- it was -- I have to remember my records. Let  
3 me look. On June the 3rd is when it was discovered  
4 that the Loritabs were missing.

5 Q. And the drug tests were, were requested on June the  
6 6th?

7 A. Yes, ma'am.

8 Q. And can you explain why there was that, that wait,  
9 that three-day wait period?

10 A. This not being something that we were used to  
11 dealing with, and basically I consulted with  
12 corporate on how they wanted to proceed with the  
13 situation as far as our investigation. And that  
14 was a time frame, I guess from the time when I  
15 reported the incident to the time that they asked  
16 as part of their investigation to ask -- request  
17 our nurses to go have the drug test done.

18 Q. Okay. And were the drug tests, were they done at  
19 your request?

20 A. Yes, ma'am. Well, mine through my -- corporate  
21 asked me, and I called the nurses up and asked them  
22 to go.

23 Q. All, all six or seven nurses?

24 A. Yes, ma'am.

25 Q. Okay. And so by contacting them, you contacted Ms.

1 Powell as well to inform her that she needed to  
2 submit to a drug test?

3 A. Yes, ma'am.

4 Q. And was she working on that day, June 6th?

5 A. No, ma'am. She was actually at home.

6 Q. So the request was done over the phone?

7 A. Yes, ma'am.

8 Q. And did she come to the facility for the drug test?

9 A. No, ma'am.

10 Q. Where did she go?

11 A. She went to what's called Hillcrest Family  
12 Practice. It's the doctor's office who also does -  
13 - our Workman's Comp doctors.

14 Q. Okay. And to your knowledge, was the drug test  
15 done on, on the day of your request June 6th, 2008?

16 A. You know, I'm unclear on that. I want to say she  
17 did. If she didn't, it was within a, about 24  
18 hours.

19 Q. Okay. Do you recall what the results were for the  
20 drug test?

21 A. That she did positive for a meth, methamphetamines.

22 Q. Okay. And did the positive for the drugs, were  
23 those the same drugs that were discovered missing  
24 from the facility?

25 A. No, ma'am.

1 Q. Okay. Did any other employees test positive on  
2 their drug tests?

3 A. No, ma'am.

4 Q. Did you have an opportunity to review the results  
5 of the drug tests?

6 A. Yes, ma'am. A copy was sent to me.

7 Q. And right there, what's on that table right ---

8 A. Yes, ma'am.

9 Q. --- in the corner, is the State's Exhibit which  
10 shows the drug tests. Are those the tests that you  
11 were able to review?

12 A. Yes, ma'am.

13 Q. Okay. And do you recall when you got the test  
14 results back?

15 A. The, the -- when we got basically a positive result  
16 was on June the 18th.

17 Q. Okay. And during that time pending the results of  
18 the drug tests, did Ms. Powell work at Fountain Inn  
19 Nursing Home?

20 A. Yes, ma'am. She did.

21 Q. About how many days or specifically on what days  
22 did she work?

23 A. She worked five days. She actually worked on June  
24 the 7th and 8th, the 9th, and the 14th and 15th.

25 Q. Were all of the nurses allowed to work at the

1 facility pending the results of the exam?

2 A. Yes, ma'am.

3 Q. And you said you guys got the results back on the  
4 18th of June?

5 A. Yes, ma'am.

6 Q. Once you got the results back, did you contact Ms.  
7 Powell about those results?

8 A. I attempted to contact her. She was actually  
9 notified by the chain of custody physician, but I  
10 know -- I don't remember at what time frame I  
11 talked to her. But I know during that short period  
12 of time I did speak with her because she, she was  
13 aware of it and she basically denied that, you  
14 know, she'd done the drugs and everything. I just  
15 told her I had to go by the documentation that was  
16 presented to me from the physician.

17 Q. And this was over the phone?

18 A. Yes, ma'am.

19 Q. After you received the results of the drug test,  
20 did Ms. Powell return to the nursing home to work?

21 A. No, ma'am.

22 Q. And what action did you take after receiving the  
23 positive results?

24 A. We, we terminated her services at that time.

25 Q. And since her termination, have you had any contact

1 with Ms. Powell?

2 A. I have spoken with Ms. Powell a couple times over  
3 the past year or so. At one time she contacted me  
4 about coming back to employment. At that time I  
5 think she was -- she's like me. We're not really  
6 familiar with this. And she wasn't -- I guess she  
7 thought everything had been settled. And when I  
8 tried to call her back, we played phone tag a lot.  
9 I guess she must, must have become aware that she  
10 couldn't work because I never could get ahold of  
11 her. I actually talked to someone down here at the  
12 Board who kind of clarified with me that she could  
13 not return to work at this time.

14 Q. Okay. I don't have any further questions. Please  
15 answer any questions the Panel may have.

16 A. Yes, ma'am.

17 EXAMINATION OF MS. LONGINO BY THE PANEL:

18 MS. GODBOLD: Do you have any questions?

19 MS. JOHNSON: I have a few. Did you go back and do  
20 any documentation review to see whether or not  
21 there was any evidence of any actual diversion  
22 based on her signing meds in and out of a med  
23 cart or anything like that? Did you see  
24 anything that raised any suspicion that she  
25 was actually physically diverting drugs from

1 the facility or from patients?

2 A. No, ma'am. I didn't have any indication. We kind  
3 of at the time when this was going on, we had a  
4 suspect.

5 MS. JOHNSON: Uh-huh.

6 A. Which that's a whole different case, another  
7 situation. She was just one of those things -- I  
8 really wasn't expecting this.

9 MS. JOHNSON: Uh-huh.

10 A. When, when she, when this -- when her results came  
11 back positive, it really surprised me.

12 MS. JOHNSON: Okay. And were there in, in the time  
13 that she was employed, did she have any other  
14 disciplinary actions?

15 A. Just tardiness. Being one minute, two minute, ten  
16 minutes late. I was looking back through the files  
17 and I did see where I had written her up for being  
18 tardy a few times.

19 MS. THAMES: I have one question. Do you normally  
20 stock any type of medications of an  
21 amphetamine nature in your carts? I'm  
22 thinking nursing home ---

23 A. No, ma'am. We generally don't. Most of ours is  
24 just a little pain medications, Ativans, Ambien.

25 MS. THAMES: Mostly sedation type?

1 A. Yeah. Uh-huh.

2 MS. GODBOLD: Anything else? I have no further  
3 questions.

4 (Off the record discussion.)

5 MS. GODBOLD: We have no further questions.

6 MS. ANDINO: Does the Panel anticipate calling Ms.  
7 Longino back? If not, I can go ahead and  
8 dismiss her for today.

9 MS. GODBOLD: Do you see any reason for her to  
10 stay?

11 MS. GREEN: Not based on what you just told me.

12 MS. GODBOLD: Yeah. You, you can be dismissed.  
13 Thank you.

14 A. Okay. Thank you.

15 MS. ANDINO: The State's final witness is Chris  
16 McCoy from RPP.

17 MS. GODBOLD: Thank you.

18 Whereupon,

19 Chris M. McCoy (RPP) is duly sworn and cautioned to  
20 speak the truth, the whole truth, and nothing but  
21 the truth.

22 DIRECT EXAMINATION OF MR. MCCOY BY MS. ANDINO:

23 Q. Please state your full name for the record.

24 A. Christopher Mark McCoy.

25 Q. Okay. Where are you currently employed?

1 A. At RPP.

2 Q. And what are your duties there at RPP?

3 A. I'm a case manager.

4 Q. And how long have you been a case manager there?

5 A. Two years.

6 Q. Okay. Are you familiar with Ms. Danna Powell  
7 Davis?

8 A. Yes, I am.

9 Q. And when was your first contact with Ms. Powell?

10 A. On November 7th, 2008, she showed up for her first  
11 enrollment with us.

12 Q. Okay. You said that was November 7th, 2008?

13 A. Yes.

14 Q. And at that time -- well, let, let me go back.

15 Whenever you guys have someone come in, what is  
16 your normal procedure as far as the first scheduled  
17 appointment?

18 A. I'll usually contact the investigator here at the  
19 Board to find out any pertinent information about  
20 the case and to inquire if the investigator needs  
21 to meet with that client further following the  
22 intake. And that was the case with Robert Cook.

23 Q. Okay. And whenever, like in this situation with  
24 Ms. Powell, whenever she presented on November 7th,  
25 did she agree to a Monitoring Agreement?

1 A. She did.

2 Q. Okay. Let me show you -- what I have here is a  
3 Monitoring Agreement for Ms. Powell, and ask you to  
4 verify that's the Agreement that she agreed to back  
5 in November 2008?

6 A. Yes, it is.

7 (Whereupon, the Participant Monitoring  
8 Agreement, consisting of 5 pages, is  
9 marked as the State's Exhibit Number 4  
10 for identification.)

11 MS. GREEN: Ms. Andino, the Complaint says she was  
12 enrolled in February 2009, so you're going to  
13 ---

14 MS. ANDINO: Yep. We'll -- yep.

15 MS. GREEN: Thank you.

16 Q. And if you can just briefly state what, what  
17 requirements are placed on, on these individuals  
18 when they sign a Monitoring Agreement with RPP.

19 A. One of the first things that we ask any new client  
20 to do is to obtain a dropping alcohol evaluation  
21 from a third-party source such as Cornerstone in  
22 Greenwood, South Carolina. And we make it a point  
23 to schedule the appointment while they're in the  
24 office with us so that, so that the loop is closed  
25 so to speak.

1 Q. And this was done, this procedure was the same  
2 procedure followed for Ms. Powell?

3 A. Yes.

4 Q. Did she get an evaluation at that time?

5 A. No, she did not.

6 Q. But you did recommend an evaluation?

7 A. Yes.

8 Q. Okay. And it was scheduled?

9 A. It was scheduled for -- I don't have the exact  
10 date, but it was middle of November of 2008.

11 Q. Okay. And was Ms. Powell subsequently discharged  
12 from RPP?

13 A. Yes, she was.

14 Q. And when was she discharged?

15 A. December 22nd, 2008.

16 Q. And for what reason?

17 A. Non-compliance with the referral. She hadn't  
18 followed through with getting the evaluation.

19 Q. Okay. And at anytime did Ms. Powell re-enroll with  
20 RPP?

21 A. She did re-enroll on February 24th, 2009.

22 Q. And did she sign another Monitoring Agreement?

23 A. Yes. She updated the previous Monitoring Agreement  
24 by initialing and resigning.

25 Q. And that's this Exhibit, the State's Exhibit 4,

1           it's on there?

2           A.    Uh-huh.

3           Q.    And it does -- does that Exhibit indicate if she  
4           signed up again on the 24th of February?

5           A.    Yes.

6           Q.    Okay.  And did Ms. Powell get evaluated this time?

7           A.    She did.  She followed through with the referral to  
8           Cornerstone and was evaluated on March the 6th,  
9           2009.

10          Q.    Okay.  At Cornerstone?

11          A.    Yes.

12          Q.    And did she receive a diagnosis at that time?

13          A.    Yes.  It was methamphetamine dependence.

14          Q.    Can you explain what, what that means,  
15          methamphetamine dependence?

16          A.    Sure.  Any person who qualifies for three or more  
17          of these in a 12-month period is diagnosed as  
18          dependent.  They either have tolerance; withdrawal  
19          symptoms -- I'm just going to refer to some notes  
20          here, because I don't know it all by heart --  
21          taking a substance in greater amounts or for longer  
22          periods of time than intended; persistent desire or  
23          unsuccessful attempts to quit using the substance;  
24          much time or activity spent in obtaining, using, or  
25          recovering from the substance; social or

1 occupational activities given up or reduced as a  
2 result of use; and continued use despite knowledge  
3 of adverse consequences. And the person who  
4 assessed Ms. Davis identified that she had  
5 withdrawal symptoms, had unsuccessfully attempted  
6 to quit in the past, and also had lost her job as a  
7 result of her use.

8 Q. Okay. And since, since that evaluation and since  
9 she re-enrolled with RPP back in February of 2009,  
10 has she been compliant with RPP?

11 A. No, she hasn't.

12 Q. Has she been discharged from RPP?

13 A. She has.

14 Q. And when was she discharged?

15 A. June 16th, '09.

16 Q. Let me show you what's going to be State's Exhibit  
17 5 and ask you if this is the Discharge Memo that  
18 RPP usually sends over to LLR whenever there is a  
19 notification of discharge?

20 (Whereupon, the Discharge Memorandum from  
21 the Recovering Professional Program,  
22 consisting of 1 page, is marked as the  
23 State's Exhibit Number 5 for  
24 identification.)

25 A. Yes, it is.

1 Q. And is this memo with regards to Ms. Powell?

2 A. Yes.

3 Q. And per the memo, for what reasons was Ms. Powell  
4 discharged?

5 A. Her discharge the second time around was due to  
6 multiple absences that were unexcused from her  
7 treatment, and I would say extreme difficulty in  
8 reaching her by phone.

9 Q. And the memo states that the date of discharge is  
10 June 16th; is that correct?

11 A. Yes.

12 Q. And since June 16th of this year, have you had any  
13 further contact with Ms. Powell?

14 A. I have not.

15 Q. You haven't heard anything from her?

16 A. No.

17 Q. Okay. I don't have any further questions. Please  
18 answer any questions the Panel may have.

19 EXAMINATION OF MR. MCCOY BY THE PANEL:

20 MS. GODBOLD: It's my understanding when enrolled  
21 in RPP that you are subjected to random drug  
22 tests?

23 A. Yes.

24 MS. GODBOLD: During that period of time from  
25 February to June, was she requested to do drug

1 tests?

2 A. Not through our program specifically. But while  
3 she was in treatment, that was a component of her  
4 treatment.

5 MS. GODBOLD: Okay. Questions? When you met with  
6 her, did she give any explanation as in  
7 prescriptions that might have caused a  
8 positive drug test for methamphetamines?

9 A. No. She admitted to using methamphetamines.

10 MS. GODBOLD: I have no further questions.

11 MS. ANDINO: Okay. You can step down. Thank you.  
12 And at this time, the State rests.

13 MS. GODBOLD: All right. Would you like to do a  
14 closing?

15 CLOSING REMARKS FOR THE STATE BY

16 MS. ANDINO: Just very briefly. The State contends  
17 that it has shown by preponderance of the  
18 evidence the allegations that have been laid  
19 out in the Formal Complaint. And as a result,  
20 that Ms. Powell has in fact violated the two  
21 sections of the Code of Laws that was cited in  
22 the Formal Complaint. And the State would  
23 request that the Panel make a recommendation  
24 to the Board that will help protect the public  
25 and just remind you that her license is

1                   currently suspended, and the State would  
2                   recommend that that suspension continue.  
3                   Thank you.

4                   MS. GODBOLD: Thank you. Appreciate y'all coming  
5                   today.

6   (Whereupon, at 10:53 a.m., the  
7   proceeding in the above-entitled  
8   matter was concluded.)

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1 STATE OF SOUTH CAROLINA )  
 ) CERTIFICATE  
 2 COUNTY OF LEXINGTON )

3

4 Be it known that I, Jennifer S. Angooraj Professional  
 5 Verbatim Court Reporter and Notary Public in and for the  
 State of South Carolina, took the foregoing hearing at 10:16  
 a.m. on Tuesday, September 29, 2009;

6

7 That the foregoing 35 pages constitute a true and  
 accurate transcription of the proceedings and all testimony  
 given at that time to the best of my skill and ability;

8

9 I further certify that I am not counsel or kin to any of  
 the parties to this cause of action, nor am I interested in  
 any manner of its outcome.

10

11 In witness whereof, I have hereunto set my hand and seal  
 this 4th day of October, 2009.

12

13

14 \_\_\_\_\_  
 Jennifer S. Angooraj  
 Notary Public for South Carolina  
 My commission expires March 14, 2017

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 is reproduced as read or quoted by the speaker.

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**DANNA M. POWELL (DAVIS), R.N.**  
License No. RN.65521

OIE # 2008-310

Respondent.

**NOTICE OF HEARING**

To: Ms. Danna M. Powell (Davis), Respondent

**PLEASE TAKE NOTICE THAT:**

1. The hearing in the above-captioned matter has been scheduled for **September 29, 2009**, at **10:00 a.m.\*** in **Room 202-02**, Kingstree Building, 110 Centerview Drive, Columbia, South Carolina.

**IF YOU DO NOT APPEAR AT THE HEARING, THE STATE BOARD OF NURSING WILL CONDUCT THE HEARING IN YOUR ABSENCE. AFTER CONDUCTING THE HEARING, THE BOARD MAY TAKE SUCH DISCIPLINARY ACTION AS IS APPROPRIATE FOR THE CHARGES DESCRIBED, AND AS IS ALLOWED BY LAW.**

2. Hearings are held in accordance with the South Carolina Administrative Procedures Act, S.C. Code Ann. § 1-23-310, *et seq.*, which describes your procedural rights, including, but not limited to, the right to respond and present evidence and testimony on all issues involved. You may have legal counsel to represent you in this matter, so as to more fully understand, protect, and assert your legal rights.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
THE STATE BOARD OF NURSING**



Jocelyn T. Andino  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

Columbia, South Carolina

06 / 17 / 09

\*Hearing times are subject to change



**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**DANNA M. POWELL (DAVIS), R.N.**  
License No. RN.65521

OIE # 2008-310

Respondent.

**NOTICE**

TO THE ABOVE-NAMED RESPONDENT:

**YOU ARE HEREBY NOTIFIED AND REQUIRED** to answer the Formal Complaint in this action, a copy of which is hereby served upon you; to file your Answer to said Formal Complaint with the Board of Nursing at Post Office Box 12367, Columbia, SC 29211-2367; and to serve a copy of your Answer to said Formal Complaint on the subscribed Attorney at Post Office Box 11329, Columbia, SC 29211-1329, within **thirty (30) days** after the service hereof, exclusive of the date of such service.

Failure to timely file your Answer in this matter may result in the allegations being **admitted and a default judgment** being rendered against you.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
BOARD OF NURSING**

  
\_\_\_\_\_  
Joan K. Bainer, MN, RN, NE BC  
Board Administrator

June 19<sup>th</sup>, 2009.

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING**

**IN THE MATTER OF:**

**DANNA M. POWELL (DAVIS), R.N.**  
License No. RN.65521

OIE # 2008-310

Respondent.

**FORMAL COMPLAINT**

The South Carolina Board of Nursing, hereinafter referred to as the Board, alleges that:

I.

Respondent is a Registered Nurse previously licensed by the Board to practice in South Carolina and was licensed at all times relevant to the matters asserted in this case. This Board has jurisdiction over Respondent and the subject matter of this action.

II.

The Board received an initial complaint and notification, as required by law, and investigated Respondent's conduct.

III.

Upon information and belief, Respondent has engaged in certain conduct that violates provisions of the South Carolina Nurse Practice Act (S.C. Code Ann. § 40-33-10, *et seq.* (1976, as amended)) and the Rules and Regulations of the Board, including the commission of the following acts:

- A. That on or about June 6, 2008, while employed at Fountain Inn Nursing Home, Respondent's employer requested that she submit to a drug screen. Respondent tested positive for amphetamines and methamphetamines.
- B. That on or about November 5, 2008, the Board issued an order to temporarily suspend Respondent's license, which was personally served on Respondent on November 20, 2008.
- C. That on or about February 24, 2009, Respondent enrolled with the SC Recovering Professional Program (RPP). Respondent was referred to Cornerstone in Greenwood, SC and was diagnosed with methamphetamine dependence.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. §§ 40-33-110(A)(1) and 40-1-110(f) (1976, as amended), in the following particulars:

- A. Respondent has violated § 40-33-110(A)(1) (1976, as amended), in that she violated a federal, state, or local law involving alcohol or drugs or committed an act involving a crime of moral turpitude, as evidenced by her testing positive for amphetamines and methamphetamines.
- B. Respondent has violated § 40-1-110(f) (1976, as amended), in that she has committed a dishonorable, unethical, or unprofessional act that is likely to deceive, defraud, or harm the public, as evidenced by her illegal use of controlled substances.

V.

**PURSUANT** to S.C. Code Ann. § 40-33-110 (1976, as amended), the Board has the authority to order the revocation or suspension of a license to practice nursing, publicly or privately reprimand the licensee, or take other reasonable action short of revocation or suspension, such as requiring the licensee to undertake additional professional training subject to the direction and supervision of the Board, or imposing restraints upon the practice of the licensee as circumstances warrant until the licensee demonstrates to the Board adequate professional competence. Additionally, the Board may require the licensee to pay a civil penalty of up to two thousand dollars (\$2,000.00) to the Board for each violation, up to a total of ten thousand dollars (\$10,000.00).

**THEREFORE**, the Board will consider these allegations and make such disposition as may be appropriate. You may respond and present evidence and argument on all issues involved. You may appear alone or with legal counsel.

**SOUTH CAROLINA BOARD OF NURSING**

06 / 17 / 09

Date

BY: \_\_\_\_\_



JOCELYN T. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
Post Office Box 11329  
Columbia, South Carolina 29211-1329



REGISTRATION SERVICES  
General Counsel  
1000 Park, Kingstree Building  
New Drive  
Box 11329  
C 29211-1329



7006 2150 0002 3531 1910

02 1M  
9004225831  
MAILED FROM ZIP CODE 29210  
\$ 06.320  
JUN 18, 2009

RETURN RECEIPT  
REQUESTED



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114

A  INSUFFICIENT ADDRESS  
 C  ATTEMPTED NOT KNOWN  
 S  NO SUCH NUMBER/STREET  
 NOT DELIVERABLE AS ADDRESSED  
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UNABLE TO FORWARD

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**RIS**  
RETURN TO SENDER

*Handwritten signature*

Danna M. Powell (Davis)  
20 Apache Drive  
Waterloo, SC 29384

LABCORP  
1904 ALEXANDER DRIVE  
RTP NC 27709  
3000

Customer Service: 800- ( ) 464

SPECIMEN ID NO. **0727407170**

LAB ACCESSION NO.

STEP 1: TO BE COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

A. Employer Name, Address and I.D. No. **HILLCREST FAMILY PRACTICE  
DRS D SILKINER & R BROKER  
PO BOX 1177, 717 SE MAIN ST  
SIMPSONVILLE SC 29681  
803-963-1548  
FAX:**  
B. MRO Name, Address, Phone and Fax No. **433033**



Location:

C. Donor SSN or Employee I.D. No. **250210608**

D. Reason for Test:  Pre-Employment  Random  Reasonable Suspicion/Cause  Post Accident  Periodic  Other

Collector Phone No. **(804) 963-1548**  
Collector Fax No. **(804) 963-338**  
F. Donor Identification Verified By:  Photo I.D.  Employer Representative

STEP 2: TO BE COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100°F?  Yes  No, Enter Remark Below Split Specimen Collection  Yes  No

REMARKS:

STEP 3: TO BE COMPLETED BY COLLECTOR AND DONOR - Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s).

STEP 4: TO BE COMPLETED BY COLLECTOR AND DONOR

G. Daytime Phone No. **804, 910-3518** Evening Phone No. **SOME** Date of Birth **03/31/67**

H. TEST(S) REQUESTED BY EMPLOYER:

I authorize the collection of this specimen for the purpose of a drug screen. I acknowledge that the specimen container(s) was/were sealed with tamper-proof seal(s) in my presence; and that the information provided on this form and on the label(s) affixed to the specimen container(s) is correct. I authorize the laboratory to release the results of the test to the company identified on this form or its designated agents.

(PRINT) DONOR'S NAME (FIRST, MI, LAST) **VONNETTA MARTIN** SIGNATURE OF DONOR **[Signature]** INITIAL **VM** MONTH **06** DAY **10** YEAR **08**

STEP 5: CHAIN OF CUSTODY INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified on this form was collected, labeled, sealed, and released to the Delivery Service noted accordance with applicable requirements.

Signature of Collector **Vonnetta Martin** Time of Collection **1528** AM/PM **PM** SPECIMEN BOTTLE(S) RELEASED TO: **LCA Courier**

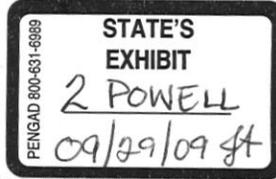
RECEIVED AT LAB:

Signature of Accessioner **[Signature]** Date (Mo/Day/Yr.) **1/1** Primary Specimen Bottle Seal Intact  Yes  No, Enter Remark Below SPECIMEN BOTTLE(S) RELEASED TO:

Printed: 02/08

015 - RTP  
3000

06/10/08



To: HILLCREST FAMILY PRACTICE  
 DRS D SILKINER & R BROKER  
 PO BX 1177,717 SE MAIN ST

From: LABCORP OTS - RTP  
 1904 ALEXANDER DRIVE  
 RTP, NC 27709  
 800-833-3984 // 919-572-6900

SIMPSONVILLE SC 29681

Laboratory Accession No.	727407170	Collected	6-JUN-08 @ 15:28
Specimen ID Number	0727407170	Received	7-JUN-08 @ 06:13
Donor's Social	250-21-0608	Reported	11-JUN-08 @ 22:28
Employee ID		Reason For Test	Random
First Name	DANNA	Account	433033
Last Name	DAVIS	Location	433033
Temperature In Range	Y	Location Phone	
Donor's Temperature		P.O.	OPEN
Donor's Phone #	(864) 910-3518	Collector's Phone	(864) 963-1548

Client: HILLCREST FAMILY PRACTICE  
 Prev.Acct#: 039410  
 Acct. Type: Non-DOT  
 Location: HILLCREST FAMILY PRA

\*\*\*\*\*SPECIMEN TEST RESULTS\*\*\*\*\*

Test(s)	Screening Cutoff	Confirm Cutoff	Confirm Quant	Result	Unit
<b>Amphetamines</b>					
Amphetamine	1000	500	531.0	POSITIVE*	ng/mL
Methamphetamine	1000	500	1986.0	POSITIVE*	ng/mL
Barbiturates	300	200		negative	ng/mL
Benzodiazepines	300	300		negative	ng/mL
Cocaine Metab.^	300	150		negative	ng/mL
Marijuana Metab.	20	15		negative	ng/mL
Methadone	300	300		negative	ng/mL
Opiates	300	300		negative	ng/mL
PCP	25	25		negative	ng/mL
Propoxyphene~	300	300		negative	ng/mL

\*Confirmation analyses are performed using Gas Chromatography/Mass Spectrometry.

^as Benzoylcegonine

~as Propoxyphene and/or Metabolite

\*\*\*\*\* End of Report \*\*\*\*\*

*Positive for amphetamines*  
*F. E. K.*  
*6/12/08*



**SAME DAY DRUG, ALCOHOL & BACKGROUND SCREENING**

**ATTENTION:**

Charnda McAbee  
Accudiagnosics-Greenville  
355 Woodruff Rd  
Greenville, SC 29607

Home Base: Random (RANDOM)  
Participant: **Danna Davis**  
Participant ID: 59  
SSN: 250-21-0608

**Results of Controlled Substance Test**

Record Status: Positive

Laboratory: Laboratory Corporation Of America

Test Type: Medical Review Officer Fee

Collection Date/Time: 06/06/2008

Batch ID: 20080618

Collection Site:

Specimen ID:

Sample Type: Urine  
Test Panel SAMHSA

<u>Test Performed</u>	<u>Result</u>	<u>Test Performed</u>	<u>Result</u>
Amphetamines 1000,500	Positive	Cocaine 300, 150	Negative
Marijuana 50, 15	Negative	Opiates 2000, 2000	Negative
Phencyclidine 25, 25	Negative		

**Positive**

Amphetamines 531 ng/mL  
Methamphetamine 1986 ng/mL

*Christopher J. Rubel M.D.*

Christopher J. Rubel, M. D.

6/18/2008

Verification Date

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**DANNA M. POWELL (DAVIS), R.N.**  
License # 65521

OGC # 09-0026  
OIE # 2008-310

Respondent.

**ORDER OF TEMPORARY SUSPENSION**

**WHEREAS**, the Office of General Counsel has provided probable cause warranting an Order of the Board to temporarily suspend Respondent from practice, in accordance with the S.C. Nurse Practice Act (Section 40-33-5, *et seq.*) of the 1976 Code of Laws of South Carolina, as amended.

**THEREFORE, IT IS ORDERED THAT**, in accordance with § 40-33-110 of the South Carolina Code of Laws Ann. (1976 as amended), Respondent's license to practice nursing in this State is hereby temporarily suspended, effective immediately, until further Order of the Board.

**AND IT IS SO ORDERED.**

**STATE BOARD OF NURSING**

11-05-08

Date

BY:

Brenda Y. Martin  
**BRENDA YATES MARTIN, RNC, MN, CNAA**  
President of the Board



SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING

In the Matter of:

**Danna M. Powell,  
RN, 65521**

OIE 2008-310  
OGC 09-0026

Respondent.

**AFFIDAVIT OF SERVICE**

PERSONALLY appeared before me, Thomas I. Syke, who, being duly sworn states:

1. That he/she is an investigator with the South Carolina Department of Labor, Licensing & Regulation, Office of Investigations and Enforcement.
2. That he/she hereby certifies that on Nov. 20, 2008, at 1:40 PM am/pm, he/she served the Order of Temporary Suspension in the above-captioned matter by hand delivery to the following individual at his/her last known address:

Danna M. Powell (Davis)  
20 Apache Drive  
Waterloo SC 29384

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION**

Thomas I. Syke  
Investigator  
LLR - Office of Investigations and Enforcement  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4470

SWORN to before me this

21 day of NOVEMBER, 2008.

Allen C. Feby (L.S.)

Notary Public for South Carolina

My Commission expires: 9-11-2016

# PARTICIPANT MONITORING AGREEMENT

I, Danna Davis, have chosen to participate in the South Carolina Recovering Professional Program (RPP), a board approved program operating under a memorandum of agreement with the Board of Nursing. RPP is established for South Carolina Health Practitioners whose practice may be impaired by substance abuse or dependency and is administered by the Lexington/Richland Alcohol and Drug Abuse Council (LRADAC). I acknowledge receipt of the RPP "Participant Handbook" which sets out the terms of participation in RPP. I understand that the RPP agrees to assist me only on these terms, and I agree to abide by them. I have had the opportunity to ask my RPP Recovery Specialist any questions I might have about the terms of participation in RPP. I understand that the terms of participation in RPP include the following and that these and the other terms of participation are explained in more detail in the RPP "Participant Handbook." Any exceptions or modifications to the terms of participation are addressed on an individual basis and must be approved in writing by the RPP Program Director. I further understand and agree that if my initial evaluation is negative, this Agreement may be modified or terminated by RPP.<sup>1</sup> I acknowledge receipt of applicable privacy practices.

## GENERAL CRITERIA

Please initial each statement.

1. The length of the monitoring program addressing problems with substance abuse/dependency is a minimum of five (5) years. Relapse may result in change of original completion date. DM 2-27-09  
DM

2. I agree to be solely responsible for payment of all costs incurred in complying with this Agreement or requirements of the board, including, but not limited to, the cost of evaluation, treatment, reporting, drug and other tests, and the RPP monthly participant fee, which will be determined by my work status. DM 2-26-09  
DM

3. I agree to completely abstain from the personal use of mood-altering substances (drugs, chemicals, or other agents), including, but not limited to, alcohol, sedatives, stimulants, narcotics, marijuana, over-the-counter drugs, etc., except as prescribed by my personal or treating healthcare provider after consultation with RPP for a documented, legitimate medical purpose.<sup>2</sup> I further agree to request of my personal or treating healthcare provider that mood-altering substances not be prescribed to treat me unless there is no alternative treatment available. Copies of all prescription medication must be submitted to RPP. Prescriptions for long term continuing medications must be resubmitted/re-prescribed every 6 months. All documentation regarding any medical treatment must be reported to RPP within 24 hours. I agree not to use over-the-counter and prescription medications, including, but not limited

DM 2-26-09 DM

<sup>1</sup> An evaluation is considered negative when the evaluation team reports no diagnosis of substance abuse or dependence and the RPP recommends modification or termination of participation requirements.

<sup>2</sup> "Healthcare provider" means a licensed physician, physician assistant, advanced practice registered nurse, podiatrist, or dentist acting within their lawful scope of practice.

PENGAD 800-831-6989

STATE'S  
EXHIBIT

4 POWELL

09/29/09 gt

to, Nyquil, Benadryl, other cough medicines and poppy seeds, unless approved in advance by RPP. Ann 2-24-09 DRD

4. I agree to participate in random witnessed drug screens administered by the drug testing service as directed by RPP as part of my monitoring requirements. I understand that it is my responsibility to be available at any time to provide a sample in the manner requested and to give that sample on the date notified, unless I have been excused in advance by RPP staff. I am responsible for all costs associated with drug screens. Ann 2-24-09 DRD

5. I understand that I am responsible for all drugs that I take and that having such drugs prescribed for me by a licensed healthcare provider does not relieve me of that responsibility. If authorized under my license to practice, I agree to refrain from writing prescriptions for any mood-altering or potentially addicting drugs for myself or members of my family. Ann 2-24-09 DRD

6. If I have voluntarily entered RPP and am anonymous to the board, I will remain anonymous to the board as long as I am compliant with RPP requirements. If I elect not to participate, withdraw, or am dismissed from RPP, I will be immediately reported to the staff of the Department of Labor, Licensing and Regulation for further action. Ann 2-24-09 DRD

7. If required by RPP, I agree to undergo a complete medical, psychiatric, and substance abuse evaluation at an approved facility and at a time as designated by RPP. The time period of the evaluation will be determined by the facility staff and shall continue until such time as the facility staff deems appropriate in order for a satisfactory determination to be made as to my fitness to practice. During the evaluation, I agree to cooperate fully with the facility staff and submit to any and all mental and physical examinations of any kind as may be deemed appropriate by the facility staff. If treatment is recommended by the evaluation team, then I agree to promptly comply with that recommendation and attend a treatment facility approved by RPP for the recommended period of time. I understand that I am responsible for the cost of the evaluation/treatment, tests, and reports to RPP. If the diagnosis is negative this contract may be terminated or length of monitoring shortened by RPP. Ann 2-24-09 DRD

8. I agree that I may be required to refrain from practice during treatment. Prior to returning to work, I will have a RPP Return to Work Release signed by the RPP or my treatment provider. I agree to comply with any restrictions on practice or duty assignment which may include no access to mood-altering medication, no overtime or on call assignments, and where applicable, altering of shift work, or requiring supervision with no home health or agency work. Compact nurses additionally will be required not to practice in any other party-state without the prior written approval of the S.C. board and written authorization from the other party-state board. Ann 2-24-09 DRD

9. I agree to identify all healthcare providers associated with my healthcare to RPP and report all medications prescribed. I must identify a primary healthcare provider who is knowledgeable about my substance abuse or dependency and my participation in RPP. I will refrain from changing personal healthcare providers without prior consultation and approval of RPP.

My primary healthcare provider is Dr. Pendagross  
Telephone# 860-456-7436

I agree that RPP may contact any of my personal healthcare providers at such time as may be desired. The signing of this Agreement shall constitute and act as a release to any and all of my personal healthcare providers (or any other provider I see before or after signing this Agreement) to communicate fully with RPP regarding my recovery and compliance with this Agreement or requirements of the board. BR 2-24-09 DR

10. I understand that the RPP monitors me on behalf of LLR and its professional licensing boards and does not provide treatment for my condition. I agree that the RPP is hereby authorized to communicate fully with and release any information concerning me to the staff of the Department of Labor, Licensing and Regulation (LLR) and any other institutions and individuals involved in my recovery and compliance with this Agreement or requirements of the board, and that information may be used in any administrative proceeding in which it may be relevant. DR

11. I understand that, if I am under a board order or agreement, the RPP will communicate with the LLR staff regarding my ongoing progress and compliance with this Agreement. I agree that, if I am under a board order or agreement, RPP staff may communicate any information about me and my progress in this program to LLR staff, the licensing board and its representatives and committees, federal and state regulatory authorities, including professional licensing boards in other states in which I am licensed or apply for licensure, and any other institutions and individuals involved in my recovery and compliance with this Agreement or requirements of the board. BR 2-24-09 DR

12. I agree that any unauthorized use of a mood-altering substance is considered a relapse and will result in a re-evaluation followed by appropriate action as indicated by the level of relapse. BR 2-24-09 DR

13. I agree to refrain immediately from practice upon receipt of a positive drug screen. I understand and agree that a confirmed drug screen of any mood-altering substance is considered conclusive evidence of the use of that substance. DR

14. I agree to participate in Peer Assistance activities and to sign a contract with my professional support group (DAAC, PAAC, PAPI, SCRIPT), if provided. I will provide or have provided documentation to RPP of my attendance. I will submit or arrange for submission of reports from my professional support group. Frequency shall be determined by the RPP in consultation with the treatment provider and peer assistance organizations. The RPP may make adjustments to frequency as appropriate throughout the monitoring process. I agree that my peer assistance group leaders may communicate fully with RPP regarding my recovery and compliance with this Agreement or requirements of the board. BR 2-24-09 DR

15. I agree to attend and participate in Self Help (12-step) group meetings and activities, as required by RPP. Frequency shall be determined by the RPP in consultation with the treatment provider. The RPP may make adjustments to meetings and activities and their frequency as appropriate throughout the monitoring

process. I agree to           ain a sponsor and maintain an ongo           relationship with him/her. I agree that my sponsor may communicate fully with RPP regarding my recovery and compliance with this Agreement or requirements of the board.                                 

           2-24-09           

16. I agree to promptly notify RPP of any changes in employment, address, telephone numbers, practice, hospital privileges, professional status, or compliance with this Agreement. Correspondence and copies of reports and notices should be directed to:

Recovering Professional Program  
300-A Outlet Pointe Blvd.,  
Suite 100  
Columbia, SC 29210

           2-24-09           

17. I agree to notify RPP before accepting or changing any employment, including work outside my profession. I further agree that my practice setting may be limited to a supervised setting consistent with applicable board policy.           

2-24-09           

18. I agree to obtain prior approval from RPP before applying for a license or registration from the US Drug Enforcement Administration (DEA) or SC Department of Health and Environmental Control (DHEC) or modifying a present DEA or DHEC license or registration.           

2-24-09           

19. I agree to sign consent forms and releases authorizing RPP to exchange information with others, including: healthcare providers, treatment facilities, employers and potential employers, peer assistance representatives and 12-step sponsors, licensing boards, and others involved in my recovery and compliance with this Agreement or requirements of the board, as deemed appropriate by RPP.           

2-24-09           

20. I understand that RPP is a South Carolina based program. I agree that if I leave South Carolina, my case will be transferred to another state as appropriate.           

2-24-09           

21. I agree to notify RPP of out-of-town plans prior to departure.            will arrange a testing schedule approved by my Recovery Specialist for completion of monitoring requirements while out-of-town.           

2-24-09           

22. I agree to maintain contact with my RPP Recovery Specialist, peer assistance representative, 12-step sponsor, and treatment provider. I am further responsible for timely submission of all required reports, surveys, and forms to RPP. I agree that written communication may be conducted by e-mail or other electronic means acceptable to RPP. I further agree to be courteous and cooperative in all contacts with the RPP staff, peer assistance group members, 12-step group members, and evaluation/treatment staff members.           

2-24-09           

23. I understand that participation in client surveys is required in order to assess the services approved or provided by RPP. I specifically agree to complete and submit any and all survey information as requested by RPP or its representatives.           

2-24-09

24. I agree to refrain from instituting legal action of any kind making any claim against the Recovering Professional Program (RPP), Lexington/Richland Alcohol and Drug Abuse Council (LRADAC), the South Carolina Department of Labor, Licensing and Regulation, or its professional and occupational licensing boards, their officers, members, representatives, and employees, for slander, libel, defamation of character, malicious prosecution, abuse of process, infliction of emotional distress, harassment, invasion of privacy, false imprisonment, or for any other reason arising out of communications, activities, or conduct relating to or concerning in any way this Agreement or its provisions or the enforcement thereof. PR 2-24-09 PR

25. I agree to waive any claim of confidentiality afforded by any local, state, or federal case, statutory, or common law to the extent necessary to carry out this Agreement or to protect the public health, safety, or welfare. By executing this Agreement, I specifically consent to execute and deliver to the program within ten (10) days of request, an authorization for the release to the program or its designees of any and all records, reports, or other information concerning myself by any and all persons or entities involved, notwithstanding any privilege provided by federal or state law. PR 2-24-09 PR

26. I understand and agree that if I fail to comply with any of the terms of this Agreement or other requirements, RPP will report such non-compliance to the staff of the Department of Labor, Licensing and Regulation, the licensing board, and other interested persons and entities as it may deem appropriate or necessary to protect the profession, my patients/clients, my health or well-being or that of my family. PR 2-24-09 PR

27. I understand and agree that no changes in the terms of this Agreement or any RPP agreement or form may be made without prior written approval from RPP. PR 2-24-09 PR

A. [Signature] 11-7-08 2-24-09  
Participant signature Date  
[Signature] 11/7/08  
Witness signature Date  
2/24/09 cmm

Memorandum

**To:** LLR BON – Jocelyn Andino  
**From:** RPP – Chris McCoy, LMSW, CACP  
**Date:** 9/22/09  
**Board:** Nursing  
**Re:** Danna M. Powell (Davis), RN65521

---

Date of Enrollment: 11/7/08, 2/24/09  
Referred by: LLR Investigative Staff  
Volunteer: No  
Date of non-compliance: 12/22/2008, 6/16/09  
Date of Discharge: 12/22/08, 6/16/09  
Date of Re-enroll: -

Time Line / Comments: RPP reports that Danna Powell (Davis) enrolled with, and was discharge by, RPP twice for noncompliance.

Ms. Powell Davis first enrolled on 11/7/08 and was referred to Cornerstone for an alcohol & drug evaluation as well as to AccuDiagnostics for a hair test. She was discharged on 12/22/08 for non-compliance for failure to obtain the evaluation and hair test as requested. At that time, her license was temporarily suspended.

She later re-enrolled with RPP on 2/24/09 and obtained her evaluation from Cornerstone, but exhibited a pattern of not responding to communication from RPP and also missing numerous treatment sessions. As a result, she was discharged again on 6/16/09. She has made no further contact with RPP.

Respectfully submitted,



Chris McCoy, LMSW, CACP

300-A Outlet Pointe Blvd.  
Suite 100  
Columbia, S.C  
29210

telephone  
(803) 896-5700

fax  
(803) 896-5710

24-hour toll-free  
emergency line  
1-877-349-2094  
[www.scrpp.org](http://www.scrpp.org)



**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**LINDA IRENE PRATER, L.P.N.**  
License No. 13000

OIE # 2007-477

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing, hereinafter referred to as the Board, will consider the Report of its Disciplinary Panel in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 1:00 p.m. in Room 108**, Kingstree Building, 110 Centerview Drive, Columbia, South Carolina. The Panel's Report, together with the transcript of the testimony taken and the exhibits in evidence before the Panel, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Report for the purpose of determining its action thereon. The Board can accept the Report in its entirety, modify the findings in the report, or make a new determination based on the information provided at the hearing. The Respondent and/or her counsel shall have the right to appear before the Board at said hearing and to submit briefs and be heard in oral argument in opposition to or in support of the recommendations of the Panel.

BY: \_\_\_\_\_

  
JOCELYN T. ANDINO  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

02 / 18 / 10

\*Hearing times are subject to change

*Handwritten initials and date:*  
✓  
DS  
2/1/10

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING, AND  
REGULATION  
BEFORE THE SOUTH CAROLINA STATE BOARD OF NURSING (Board)

In the Matter of:  
**Linda Irene Prater, L.P.N.**,  
License No.13000,  
Licensee.

OIE No. 2007-477

**DISCIPLINARY PANEL REPORT**

This matter came before the Board's Disciplinary Panel of Nursing (the Panel) for hearing on September 15, 2009. A quorum of Panel members was present. The Notice and Complaint and Notice of Hearing were served on the Respondent on or about June 9, 2009, via certified mail and regular mail. The Notice of Hearing and Complaint were returned as unclaimed to sender, the State. The Panel found that the State was diligent in attempting service and decided to proceed with the hearing.

The hearing was held pursuant to §1-23-310, §40-33-10 *et seq.*, and §40-33-110 *et seq.* of the South Carolina Code of Laws Ann. (1976, as amended) to determine whether sanctions should be imposed. The Respondent was not present and was not represented by counsel. Jocelyn T Andino, Assistant General Counsel, represented the State.

The Respondent was charged with a violation of §40-33-110(A)(3) of the South Carolina Code of Laws Ann. (1976, as amended).

**FINDINGS OF FACT**

Based upon the preponderance of the evidence on the whole record, the Panel finds the facts of the case to be as follows:

1. The Respondent is a Licensed Practical Nurse duly licensed to practice in South Carolina, and was so licensed at all times relevant to the issues asserted in this case and is subject to the jurisdiction of the Panel.
2. The Program Coordinator for the Wilson I (Medically Fragile) CTH II in Blythewood, managed by Fairfield County Disabilities & Special Needs Board, received a complaint from a nurse that the Respondent did not replace a broken Foley Catheter. The Program Coordinator never spoke to the Respondent.
3. The Program Coordinator filed a critical incident report with the South Carolina Department of Special Needs and was subsequently instructed to file a complaint with the South Carolina Department of Labor, Licensing, and Regulation (LLR).

4. The patient was not in a life-threatening situation or in critical danger at the time the broken catheter was discovered.

5. There are no policies or procedures in place for the replacement of equipment such as catheters. The Wilson I (Medically Fragile) CTH II does not provide classes or orientations. The Respondent is still employed with Statewide Nursing Solutions.

6. Should a finding of fact constitute a conclusion of law, or *vice versa*, it is adopted as such and directed that it be treated accordingly.

### CONCLUSIONS OF LAW

Based upon careful consideration of the facts in this matter, the Panel finds and concludes as a matter of law that:

1. The Panel has jurisdiction in this matter and, upon finding that a licensee has violated any of the provisions of § 40-33-110 *et seq.* the South Carolina Code of Laws Ann. (1976, as amended), has the authority to cancel, fine, suspend, revoke, issue a public reprimand or private reprimand, or restrict, including probation or other reasonable action, such as requiring additional education and training, the authorization to practice of a person who has engaged in misconduct.

2. The Respondent did not violate §40-33-110 (A)(3). There are no policies or procedures regarding replacing equipment. There is no willful or repeated conduct that by professional or ethical standards would render the Respondent incompetent to perform the duties or responsibilities of a nurse.

3. The sanction(s) imposed is designed not to punish the Respondent, but to protect the life, health, and welfare of the public at large.

### RECOMMENDATION (S)

The Panel, based upon the Findings of Fact and Conclusions of Law as indicated above, recommends:

1. That the matter be dismissed.

SOUTH CAROLINA

DISCIPLINARY PANEL OF NURSING

BY: Pamela Scaglione  
Pamela Scaglione  
Panel Chairperson

October 21<sup>st</sup>, 2009

#### CERTIFICATE OF SERVICE BY MAIL

This is to certify that the undersigned has this date served this DPD in the above entitled action upon all parties to this cause by depositing a copy hereof, in the United States mail, postage paid, or in the Interagency Mail Service addressed to the party (ies) or the attorney (s) at the following address: 3104 W. North Street #128 Columbia SC 29203

This is a copy of None 2009-10-21  
By: Shirley B. [Signature]  
Secretary

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

In the Matter of:

**Linda Prater, L.P.N**  
License No. 13000

OIE #2007-477

Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice of Final Order Hearing** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Ms. Linda I. Prater

1231 Mount Elon Church Road  
Hopkins, SC 29061

8310 Two Notch Road, Apt 128  
Columbia, SC 29223

SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING & REGULATION

*Krystal J McFadden*  
Krystal J McFadden

7008 1140 0000 7031 7713

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
*(Domestic Mail Only, No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

1231 MOUNT ELON CHURCH RD  
HOPKINS, SC 29061

Postage	\$	2/19/10 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Pos		
Sent To <b>Linda Prater</b>		
Street, Apt. or PO Box		
City, State		

7008 1140 0000 7031 7706

**U.S. Postal Service**  
**CERTIFIED MAIL RECEIPT**  
*(Domestic Mail Only, No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

1231 MOUNT ELON CHURCH RD  
HOPKINS, SC 29061

Postage	\$	2/19/10 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total		
Sent To <b>Linda I. Prater</b>		
Street, Apt. or PO Box		
City, State		

STATE OF SOUTH CAROLINA  
DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE BOARD OF NURSING

IN THE MATTER OF )  
)  
LINDA IRENE PRATER, LPN )  
LICENSE NO. 13000 )  
) PANEL HEARING  
)  
2007-477 )  
)  
RESPONDENT. )

Given before Jennifer S. Angooraj, Professional Verbatim Court Reporter and Notary Public in and for the State of South Carolina, commencing at the hour of 12:35 p.m. on Tuesday, September 15, 2009, at the offices of the South Carolina Department of Labor, Licensing and Regulation, 110 Centerview Drive, Columbia, South Carolina.

Reported by:  
Jennifer S. Angooraj

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A P P E A R A N C E S

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Panel Members: Pamela Scaglione, RN, MN (Chair)  
Carole Siegfried, RN  
Stephanie Burgess, RN, APRN

For the State: Jocelyn T. Andino, Esquire  
SC Department of Labor, Licensing &  
Regulation/Office of General Counsel  
110 Centerview Drive  
Post Office Box 11329  
Columbia, SC 29211-1329

For the Respondent: Not present/represented by counsel

Advice Counsel: Gwendolyn Green, Esquire (LLR)

Also Present: Investigator Jeannie Gwyn Morris

Reported by: Jennifer S. Angooraj

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25

INDEX TO PROCEEDINGS

Opening Remarks for the State by Ms. Andino . . . . .	5
Certificate . . . . .	13

INDEX TO EXHIBITS

State's 1: (Referenced, but not introduced).

PROCEEDINGS

1  
2 MS. SCAGLIONE: This is a hearing of the South  
3 Carolina Department of Labor, Licensing,  
4 Licensing and Regulation Board of Nursing  
5 versus Linda Irene Prater being held in  
6 Columbia, South Carolina this 15th day of  
7 September 2009. The Complaint and Notice of  
8 Hearing was served by certified mail and  
9 returned unclaimed on August 3rd, 2009. All  
10 of the documents are in the Board's file and  
11 made a part of the record. My name is Pamela  
12 Scaglione and I am the designated chairperson  
13 for this hearing. The other member (sic) of  
14 the Nursing Board Panel hearing on this case  
15 is Carole Siegfried and Stephanie Burgess.  
16 The attorney advising the Board is Gwendolyn  
17 Green. The State is represented by Jocelyn  
18 Andino, legal counsel for the South Carolina  
19 Department of Labor, Licensing, and  
20 Regulation. This hearing will be conducted as  
21 informally as is, as is compatible with an  
22 equitable presentation of both sides of the  
23 case and in compliance with the provisions of  
24 the South Carolina Administrative Procedures  
25 Act and the Nursing Board Rules and

1 Regulation. The State and the Respondent may  
2 if they so desire make opening statements.  
3 Thereafter the State shall present its case,  
4 and then the Respondent will present her case.  
5 Both parties may make closing statements if  
6 they wish. The State will have the option of  
7 closing first or last. The Panel shall hear  
8 testimony and receive evidence and shall then  
9 make a report of the proceedings before it  
10 including its findings of fact, conclusions of  
11 law, and recommendations and shall file the  
12 same with the Secretary of the Board within 60  
13 days of the hearing.

14 OPENING REMARKS FOR THE STATE BY

15 MS. ANDINO: This is the matter of Linda Irene  
16 Prater, a licensed practical nurse with  
17 license number 13000 and OIE case number 2007-  
18 477. The record should reflect that the  
19 Respondent is not present and she is not  
20 represented by counsel. We are here today  
21 because the Board received a complaint which  
22 it investigated which to led to information to  
23 believe that Ms. Prater has conducted herself  
24 in a manner that violates the Nurse Practice  
25 Act, specifically Section 40-33-110 (A)(3).

1           The State alleges that on November 6th, 2007,  
2           while Ms. Prater was employed at Wilson I  
3           Medically Fragile CTH II in Blythewood, she  
4           failed to replace a broken Foley Catheter on a  
5           patient or a resident M.W. Ms. Prater worked  
6           the 12 a.m., or the 12-midnight to eight a.m.  
7           shift and was aware that the Foley Catheter  
8           needed to be replaced. The catheter was not  
9           replaced until approximately ten a.m. on  
10          November 6th. In addition, during Ms.  
11          Prater's entire shift on November 6th, she  
12          failed to make any entries in the nursing  
13          notes for patient M.W. And before the State  
14          calls its first witness, I'd like to go ahead  
15          and make a part of the record the Notice of  
16          Hearing, which indicates that the State will  
17          proceed in the Respondent's absence if she  
18          does not appear, as well as the Notice; the  
19          Formal Complaint; Certificate of Service,  
20          which will show that we actually went beyond  
21          our obligation to just send the Notice to the  
22          last address that she has listed on our data  
23          system. We actually researched and found  
24          another address which we sent to her in July.  
25          One was returned as unable to forward. One

1                   was returned as unclaimed and we re-sent it  
2                   again one last time at the very beginning of  
3                   August, and I believe that's the one that came  
4                   back unclaimed. And the State submits that it  
5                   has met its requirement of proper service for  
6                   this Respondent. And if there are no  
7                   objections, the State would proceed at this  
8                   time.

9                   MS. GREEN: Excuse me. Madam Chairman, would you  
10                   go into executive session, please?

11                   MS. SCAGLIONE: Sure. Excuse us, we need to go  
12                   into executive session.

13                   MS. ANDINO: Okay.

14                   (Executive session from 12:40 p.m. to 12:48 p.m.)

15                   MS. SCAGLIONE: Ms. Andino, do you have any  
16                   documentation from Ms. Prater to put into  
17                   evidence today?

18                   MS. ANDINO: From Ms. Prater?

19                   MS. SCAGLIONE: Right. Any, any of her  
20                   documentation?

21                   MS. ANDINO : No. The, the Board, OGC, and the  
22                   investigator, we've never been able to make  
23                   contact with Ms. Prater.

24                   MS. SCAGLIONE: You mean documentation from the,  
25                   from the shift that she worked as far as

1 nursing notes go? Nursing note documentation?

2 MS. ANDINO: We have time sheets that she worked on  
3 that day.

4 MS. SCAGLIONE: No actual documentation like we  
5 had, nursing note documentation?

6 MS. ANDINO: No. The State's allegation is that  
7 she didn't make any nursing notes on her  
8 shift. So no, we wouldn't have any.

9 MS. SCAGLIONE: Okay. We have a preliminary  
10 recommendation. We don't find any violation  
11 of number three, but we do have a violation of  
12 failure to supply change of address to the  
13 State Board and failure to document. And we'd  
14 like to fine her \$500 and give her an  
15 indefinite suspension which she must petition  
16 and appear before the Board.

17 MS. ANDINO: If that's the Panel's recommendation.  
18 If that's the Panel's recommendation then the  
19 State doesn't have an objection to that. So  
20 you're waiving the, the requirement for the  
21 hearing?

22 MS. SIEGFRIED: Yes.

23 MS. SCAGLIONE: Yes.

24 MS. ANDINO: Okay.

25 MS. SCAGLIONE: She's not here.

1 MS. SIEGFRIED: We've heard it all.

2 MS. ANDINO: Yes, you have. Yes, you have.

3 MS. SIEGFRIED: And we've seen it all.

4 MS. MORRIS: When, when y'all say indefinite  
5 suspension ---

6 MS. SCAGLIONE: Her license is suspended up until  
7 the time she actually makes an appearance  
8 before the Board.

9 MS. MORRIS: In, in regards to this particular  
10 situation?

11 MS. SCAGLIONE: Correct. Yes.

12 MS. MORRIS: Okay. All right.

13 MS. BURGESS: Correct. And she'll have to come  
14 before the Board and state her case.

15 MS. GREEN: But the fine is still in place.

16 MS. MORRIS: Okay.

17 MS. GREEN: She still has to pay the fine.

18 MS. MORRIS: Okay.

19 MS. ANDINO: Can I just ask another followup and  
20 maybe from Gwen? As far as the, will the  
21 findings of facts be the allegations? The  
22 State's allegations?

23 MS. GREEN: What I would do as far as drafting the  
24 order, I, the most that I would put in  
25 findings of fact is similar to the prior cases

1           that the policies and procedures -- but I  
2           don't even know if I'd put that in. What I  
3           basically was going to do is put in that the,  
4           the fact that the State was so diligent in  
5           trying to certify, trying to send her notice  
6           of this hearing. And first by what certified  
7           mail and it was returned unclaimed. And then  
8           returned -- you sent, you mailed again and  
9           then it was returned as address unknown.  
10          Those were the basics. And then I would put  
11          that there were no violations of, of, of  
12          number three, you know, no violations ---

13        MS. ANDINO: So you wouldn't address the, the issue  
14          as far as the, the incident at the home?

15        MS. GREEN: Actually, what I would do is -- she,  
16          she must appear and petition before the Board  
17          for interview and statement to, to, to tell  
18          the Board why she did not do ---

19        MS. SCAGLIONE: Why she didn't document.

20        MS. GREEN: --- what she did. And so she'd have to  
21          petition before the Board to do that.

22        MS. SIEGFRIED: To explain herself.

23        MS. GREEN: But as far as this particular case here  
24          ---

25        MS. SCAGLIONE: With the Foley Catheter being

1 replaced.

2 MS. GREEN: It would, it would be the same.

3 Because it would've been if had she appeared  
4 and just did the same thing as the other lady  
5 did, it would've been a dismissal altogether.

6 MS. ANDINO: What about the second allegation where  
7 she failed to do any nursing notes throughout  
8 the entire shift?

9 MS. SCAGLIONE: That's why she's getting ---

10 MS. GREEN: That's what I'm saying.

11 MS. MORRIS: That's why you're giving her the \$500  
12 fine?

13 MS. GREEN: That's why she's getting the fine.

14 MS. ANDINO: Oh, I'm sorry. Okay.

15 MS. SCAGLIONE: That's why we're suspending her  
16 license.

17 MS. BURGESS: That's what we found is that she did  
18 not document.

19 MS. ANDINO: Oh, I'm sorry.

20 MS. BURGESS: She did not notify the Board of any  
21 change of address that's required of the  
22 statute.

23 MS. SCAGLIONE: Uh-huh. Right. It has nothing to  
24 do with that Foley Catheter.

25 MS. ANDINO: Okay.

1 MS. SCAGLIONE: Not replacing it.

2 MS. ANDINO: Okay. I see what you're saying.

3 Okay.

4 MS. BURGESS: So, we, we agree that she was majorly  
5 in fault with that.

6 MS. SIEGFRIED: Right.

7 MS. GREEN: So they, they were going to do 250 and  
8 then they gave her 500 to make sure.

9 MS. ANDINO: Okay.

10 MS. BURGESS: All right. Sounds good.

11 MS. ANDINO: Sounds good.

12 MS. BURGESS: Thank you so much.

13 MS. ANDINO: Thank you.

14 MS. MORRIS: It was nice to meet you.

15 MS. BURGESS: Nice meeting you.

16 (Whereupon, at 12:52 p.m., the  
17 proceeding in the above-entitled  
18 matter was concluded.)

19

20

21

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24

25

1 STATE OF SOUTH CAROLINA )  
 2 ) CERTIFICATE  
 3 COUNTY OF LEXINGTON )  
 4

5 Be it known that I, Jennifer S. Angooraj Professional  
 6 Verbatim Court Reporter and Notary Public in and for the  
 7 State of South Carolina, took the foregoing hearing at 12:35  
 8 p.m. on Tuesday, September 15, 2009;

9  
 10 That the foregoing 12 pages constitute a true and  
 11 accurate transcription of the proceedings and all testimony  
 given at that time to the best of my skill and ability;

12 I further certify that I am not counsel or kin to any of  
 13 the parties to this cause of action, nor am I interested in  
 any manner of its outcome.

14 In witness whereof, I have hereunto set my hand and seal  
 15 this 24th day of September, 2009.

16  
 17 \_\_\_\_\_  
 Jennifer S. Angooraj  
 Notary Public for South Carolina  
 18 My commission expires January 4, 2010  
 19

20  
 21  
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 23  
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**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**DARLEEN WOLF, L.P.N.**  
License No. LPN.28694

OIE # 2007-475

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing, hereinafter referred to as the Board, will consider the Report of its Disciplinary Panel in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 1:00 p.m.\* in Room 108**, Kingstree Building, 110 Centerview Drive, Columbia, South Carolina. The Panel's Report, together with the transcript of the testimony taken and the exhibits in evidence before the Panel, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Report for the purpose of determining its action thereon. The Board can accept the Report in its entirety, modify the findings in the report, or make a new determination based on the information provided at the hearing. The Respondent and/or her counsel shall have the right to appear before the Board at said hearing and to submit briefs and be heard in oral argument in opposition to or in support of the recommendations of the Panel.

BY:

  
\_\_\_\_\_  
JOCELYN T. ANDINO  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

02 / 18 / 10

\*Hearing times are subject to change

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING, AND  
REGULATION  
BEFORE THE SOUTH CAROLINA STATE BOARD OF NURSING (Board)**

In the Matter of:  
**Darleen Wolf, L.P.N.**,  
License No. 28694,  
Licensee.

OIE No. 2007-475

**DISCIPLINARY PANEL REPORT**

This matter came before the Board's Disciplinary Panel of Nursing (the Panel) for hearing on September 15, 2009. A quorum of Panel members was present. The Notice and Complaint and Notice of Hearing were served on the Respondent on or about June 11, 2009 via certified mail and regular mail.

The hearing was held pursuant to §1-23-310, §40-33-10 *et seq.*, and §40-33-110 *et seq.* of the South Carolina Code of Laws Ann. (1976, as amended) to determine whether sanctions should be imposed. The Respondent appeared and waived her right to have counsel present. Jocelyn T Andino, Assistant General Counsel, represented the State.

The Respondent was charged with a violation of §40-33-110(A)(3) of the South Carolina Code of Laws Ann. (1976, as amended).

**FINDINGS OF FACT**

Based upon the preponderance of the evidence on the whole record, the Panel finds the facts of the case to be as follows:

1. The Respondent is a Licensed Practical Nurse duly licensed to practice in South Carolina, and was so licensed at all times relevant to the issues asserted in this case and is subject to the jurisdiction of the Panel.
2. The Program Coordinator for the Wilson I (Medically Fragile) CTH II in Blythewood, managed by Fairfield County Disabilities & Special Needs Board, received a complaint from a nurse that the Respondent did not replace a broken Foley Catheter. The Program Coordinator never spoke to the Respondent.
3. The Program Coordinator testified that she filed a critical incident report with the South Carolina Department of Special Needs on or about November 11, 2007 and was subsequently

instructed to file a complaint with the South Carolina Department of Labor, Licensing, and Regulation (LLR).

4. The Respondent testified that that the patient was not in a life-threatening situation or in critical danger at the time she discovered the broken catheter, therefore she did not call an ambulance. She documented the discovery in her notes. The Respondent and another nurse searched for a replacement catheter in the supply cabinets including the ones located in the garage. When another catheter could not be found, the Respondent offered to take the patient to the hospital to get another catheter, but the lift to the van was broken. The Respondent further testified that she offered to go the hospital. The Respondent's notes on November 5, 2007, show that another catheter would arrive on the next day, "per hospice".

5. Another Licensed Practical Nurse (LPN) at Wilson I (Medically Fragile) CTH II testified that she put in new catheter on November 6, 2007. The LPN testified that she did *not* (*emphasis added*) replace one and had no recollection where she got the new catheter. The LPN also testified that she had no knowledge of policies or procedures in place for the replacement of equipment or for emergencies.

6. The Program Coordinator testified that there are no policies or procedures in place for the replacement of equipment such as catheters. The Program Coordinator stated that she had no knowledge that the Respondent ever received any booklet or pamphlet regarding emergencies for the replacement of equipment.

7. The Respondent's supervisor for Statewide Nursing Solutions, testified that she offered to attend any classes or orientation regarding polices and procedures at Wilson I (Medically Fragile) CTH II. The Manager was told that Wilson I (Medically Fragile) CTH II did not provide classes or orientations. The Respondent is still employed with Statewide Nursing Solutions.

8. Should a finding of fact constitute a conclusion of law, or *vice versa*, it is adopted as such and directed that it be treated accordingly.

## CONCLUSIONS OF LAW

Based upon careful consideration of the facts in this matter, the Panel finds and concludes as a matter of law that:

1. The Panel has jurisdiction in this matter and, upon finding that a licensee has violated any of the provisions of § 40-33-110 *et seq.* the South Carolina Code of Laws Ann. (1976, as amended), has the authority to cancel, fine, suspend, revoke, issue a public reprimand or private reprimand, or restrict, including probation or other reasonable action, such as requiring additional education and training, the authorization to practice of a person who has engaged in misconduct.

2. The Respondent did not violate §40-33-110 (A)(3). There are no policies or procedures regarding replacing equipment. There is no willful or repeated conduct that by professional or ethical standards would render the Respondent incompetent to perform the duties or responsibilities of a nurse.

3. The sanction(s) imposed is designed not to punish the Respondent, but to protect the life, health, and welfare of the public at large.

### RECOMMENDATION (S)

The Panel, based upon the Findings of Fact and Conclusions of Law as indicated above, recommends:

1. That the matter be dismissed.

### SOUTH CAROLINA

### DISCIPLINARY PANEL OF NURSING

BY: Pamela Scaglione  
Pamela Scaglione  
Panel Chairperson

October 21<sup>st</sup>, 2009

#### CERTIFICATE OF SERVICE BY MAIL

This is to certify that the undersigned has this date served this DPSR in the above entitled action upon all parties to this cause by depositing a copy hereof in the United States mail postage paid or in the Interagency Mail Service addressed to the party(ies) or their attorney(s) to the following address: 7725 South Circle Court, 29209

This is a copy of Administrative Order  
by Shirley Ann Allen  
Printed name, date & signature



**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

In the Matter of:

**DARLEEN WOLF, L.P.N.**  
License No. 28694

OIE #2007-475

Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice of Final Order Hearing and a copy of Disciplinary Panel Report** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Ms. Darlene Wolf  
7725 Sunview Circle  
Columbia, SC 29209-3036

SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING & REGULATION

*Krystal J McFadden*

Krystal J McFadden  
Administrative Assistant  
LLR-Office of General Counsel  
Post Office Box 11329  
Columbia SC 29211 1329

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STATE OF SOUTH CAROLINA  
DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE BOARD OF NURSING

IN THE MATTER OF	)	
	)	
DARLEEN WOLF, LPN	)	
LICENSE NO. 28694	)	
	)	PANEL HEARING
	)	
2007-475	)	
	)	
RESPONDENT.	)	

Given before Jennifer S. Angooraj, Professional Verbatim Court Reporter and Notary Public in and for the State of South Carolina, commencing at the hour of 10:18 a.m. on Tuesday, September 15, 2009, at the offices of the South Carolina Department of Labor, Licensing and Regulation, 110 Centerview Drive, Columbia, South Carolina.

Reported by:  
Jennifer S. Angooraj

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A P P E A R A N C E S

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Panel Members: Pamela Scaglione, RN, MN (Chair)  
Carole Siegfried, RN  
Stephanie Burgess, RN, APRN

For the State: Jocelyn T. Andino, Esquire  
SC Department of Labor, Licensing &  
Regulation/Office of General Counsel  
110 Centerview Drive  
Post Office Box 11329  
Columbia, SC 29211-1329

For the Respondent: Pro se

Advice Counsel: Gwendolyn Green, Esquire (LLR)

Reported by: Jennifer S. Angooraj

INDEX TO PROCEEDINGS

1

2 Opening Remarks for the State

3 by Ms. Andino . . . . . 5

4 Opening Remarks by the Respondent, Ms. Darleen Wolf . . . . . 6

5 Examination of Investigator Jeannie Gwyn Morris

6 by Ms. Andino . . . . . 8

7 by the Board . . . . . 13

8 Examination of Ms. Rebecca P. Swearingen

9 by Ms. Andino . . . . . 15

10 by the Board . . . . . 25

11 Examination of Ms. Pearline M. Livingston

12 by Ms. Andino . . . . . 40

13 by the Board . . . . . 49

14 Examination of Ms. Mary Dawn Ruth Mills

15 by Ms. Andino . . . . . 55

16 by the Board . . . . . 58

17 Statement by the Respondent, Ms. Darleen Wolf . . . . . 62

18 Examination of Ms. Darleen Wolf

19 by Ms. Andino . . . . . 69

20 by the Board . . . . . 76

21 Examination of Ms. Tammy Walker

22 by Ms. Wolf . . . . . 95

23 by the Board . . . . . 97

24 by the State . . . . . 99

25 Certificate . . . . . 102

INDEX TO EXHIBITS:

20 State's 1: Waiver of Attorney (1 page)

21 State's 2: Notice of Hearing, Notice, Formal

22 Complaint, Certificate of Service (6

23 pages)

24 State's 3: Physician Order Form and Nursing Notes

25 (15 pages)

PROCEEDINGS

1  
2 MS. SCAGLIONE: This is a hearing of the South  
3 Carolina Department of Labor, Licensing,  
4 Licensing and Regulation Board of Nursing  
5 versus Darleen Wolf being held in Columbia,  
6 South Carolina this 15th day of September  
7 2009. The complainant (sic) and Notice of  
8 Hearing was served by certified mail on June  
9 11th 2009. All of the documents are in the  
10 Board's file and made a part of the record.  
11 My name is Pamela Scaglione and I am the  
12 designated chairperson for this hearing. The  
13 other members of the Nursing Board Panel  
14 hearing on this case is Carole Siegfried and  
15 Stephanie Burgess. The attorney advising the  
16 Board is Gwendolyn Green. The State is  
17 represented by Jocelyn Andino, legal counsel  
18 for the South Carolina Department of Labor,  
19 Licensing, and Regulation. This hearing will  
20 be conducted as informally as is compatible  
21 with an equitable presentation of both sides  
22 of the case and in compliance with the  
23 provisions of the South Carolina  
24 Administrative Procedures Act and the Nursing  
25 Board Rules and Regulation. The State and the

1 Respondent may if they so desire make opening  
2 statements. Thereafter the State shall  
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7 The Panel shall hear testimony and receive  
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10 of fact, conclusion of law, and  
11 recommendations and shall file the same with  
12 the Secretary of the Board within 60 days of  
13 the hearing.

14 OPENING REMARKS FOR THE STATE BY

15 MS. ANDINO: Thank you. This is the matter of  
16 Darleen Wolf a licensed practical nurse with  
17 license number 28694. This is OIE case number  
18 2007-475. We're here today because the Board  
19 received a complaint and investigated the  
20 matter and has information to believe that Ms.  
21 Wolf's conduct has violated the Nurse Practice  
22 Act, specifically Section 40-33-110 Section  
23 (A)(3) of the Nurse Practice Act.  
24 Specifically, the State alleges that on or  
25 about November 5th, 2007, while Ms. Wolf was

1 employed at Wilson I Medically Fragile CTH II  
2 in Blythewood, South Carolina, she failed to  
3 replace a broken Foley Catheter on patient  
4 with the initials M.W. She worked the four  
5 p.m. to 12-midnight shift and was informed of  
6 the location of replacement but failed to  
7 retrieve or replace the Foley Catheter. The  
8 catheter was not replaced until approximately  
9 ten a.m. on November 6th. To substantiate  
10 these allegations, the State will provide  
11 testimony from witnesses from the facility who  
12 will attest that there was a replacement  
13 catheter located at the facility and that Ms.  
14 Wolf was made aware of it.

15 MS. SCAGLIONE: Do you have an opening statement  
16 Ms. Wolf?

17 OPENING REMARKS BY THE RESPONDENT

18 MS. WOLF: Yes, ma'am. When I worked that day I  
19 was not informed of a replacement catheter  
20 being anywhere at the site. I went out to the  
21 cabinet, there's a cabinet that each resident  
22 has.

23 MS. GREEN: Excuse me. Madam Chairperson?

24 MS. WOLF: I'm sorry?

25 MS. GREEN: That's testimony. You're going to have



1 consisting of 1 page, and the Notice of  
2 Hearing; the Notice; the Formal  
3 Complaint; and the Certificate of  
4 Service, consisting of 6 pages, are  
5 marked as the State's Exhibit Numbers 1  
6 and 2 respectively for identification).

7 MS. GREEN: The service was 6/11, was it not?

8 MS. ANDINO: Yes. June 11th, 2009.

9 MS. GREEN: That's what I thought.

10 MS. ANDINO: And at this time the State calls its  
11 first witness, Investigator Gwyn Morris.

12 MS. GREEN: Is that Gwyn like in G-W-E-N or G-W-Y-  
13 N?

14 MS. MORRIS: Y-N.

15 Whereupon,

16 Jeannie Gwyn Morris is duly sworn and cautioned to  
17 speak the truth, the whole truth, and nothing  
18 but the truth.

19 EXAMINATION OF MS. MORRIS BY MS. ANDINO:

20 Q. Ms. Morris, please state your full name for the  
21 record.

22 A. Jeannie Gwyn Morris.

23 Q. And where are you employed?

24 A. South Carolina Department of LLR.

25 Q. And what are your duties here at LLR?

1 A. I'm an investigator with, for the Nursing Board.

2 Q. And how long have you been an investigator?

3 A. Well, I've been with the Department of Labor since  
4 -- I've been there almost 18 years. The first 13,  
5 I was an investigator with the Wages and Child  
6 Labor Division. Then I went to the Fire Marshall's  
7 Office and was a Deputy Fire Marshall for three  
8 years. And now I'm back over here at the Nursing  
9 Board and I've been here over a year now.

10 Q. And in that past year, about how many cases would  
11 you say you've, you've investigated?

12 A. The past year about 50 to 55 in the Nursing Board.  
13 Over 2,500 in the other divisions.

14 Q. And did you investigate a matter involving Ms.  
15 Darleen Wolf?

16 A. I did.

17 Q. And was this investigation initiated pursuant to a  
18 Complaint?

19 A. It was.

20 Q. And can you just briefly state the reasoning in  
21 that Complaint?

22 A. Yes, ma'am. We received a Complaint that the,  
23 that, that Ms. Wolf had not replaced a Foley  
24 Catheter in the patient.

25 Q. Okay. And during the course of your investigation,

1           what, what sort of information did you obtain  
2           relating to, to this Complaint and to this matter?

3           A.    Okay.  We received the Complaint, received the  
4           nurses notes, witness statements.

5           Q.    Did you conduct any interviews?

6           A.    Yes, I did.

7           Q.    And whom did you interview?

8           A.    Becky Swearingen, she's the coordinator for the  
9           Fairfield County Disabilities and Special Needs  
10          Board.  And Pearline Livingston, who was a direct  
11          care person at the facilities.  And then I spoke  
12          with Mary Mills, who's a nurse.  And I did that  
13          interview by phone.

14          Q.    So the first two interviews were in person?

15          A.    That's correct.

16          Q.    Okay.  Let me just show you what's going to be  
17          State's Exhibit Number 3.

18                               (Whereupon, Physician Order Form and  
19                               Nursing Notes, consisting of 15 pages, is  
20                               marked as the State's Exhibit Number 3  
21                               for identification.)

22          MS. ANDINO:  Let me know if you have an objection  
23                               to that.

24          MS. GREEN:  While, while, while she's looking, you  
25                               said you conducted interviews with who?

1 A. Becky Swearingen, Swearingen. It's S-W-E-A-R-I-N-  
2 G-E-N.

3 MS. GREEN: She was the?

4 A. The program coordinator.

5 MS. ANDINO: No objections? It's okay?

6 A. And did you get Pearline Livingston?

7 MS. GREEN: Pearline?

8 A. Yes, ma'am.

9 MS. GREEN: And she was the?

10 A. Direct care staff.

11 MS. GREEN: Director staff?

12 A. Her position is titled direct care staff.

13 MS. ANDINO: The record should reflect that there's  
14 no objection to enter Exhibit 3.

15 Q. Ms. Morris, can you tell me if those are the  
16 records that you reviewed during your  
17 investigation?

18 A. Yes, they are.

19 Q. And did you obtain those records through a  
20 subpoena?

21 A. Yes, I did.

22 Q. And do those records reflect the time frame for  
23 which you were investigating?

24 A. They do.

25 Q. To the best of your recollection, this being

1 State's Exhibit Number 3, is that the extent of  
2 information you obtained with regards to, to the  
3 patient, the resident's records?

4 A. Yes.

5 Q. Okay. Did you ever have an opportunity to contact  
6 Ms. Wolf regarding this matter?

7 A. Yes, ma'am. I did.

8 Q. By what means?

9 A. By telephone and I also sent her a letter.

10 Q. Okay. And were you able to, to speak with her  
11 personally?

12 A. She responded to my letter.

13 Q. Okay. And when you -- whenever you, you spoke with  
14 Ms. Wolf, was that in person or through the phone?

15 A. It was through the phone.

16 Q. Okay. And at that time, did she admit to, to any  
17 wrongdoing?

18 A. No, she didn't. She just stated there was no Foley  
19 Catheter available.

20 Q. Okay. Did you request a written statement from Ms.  
21 Wolf ---

22 A. I did.

23 Q. --- regarding this incident? And did you receive -  
24 --

25 A. No.

1 Q. --- the statement from her?

2 A. I did not.

3 Q. After that phone call, did you, did you have an  
4 opportunity to speak with Ms. Wolf again regarding  
5 this incident?

6 A. No.

7 Q. So just that one time you guys spoke?

8 A. Uh-huh.

9 Q. Okay. I don't have any further questions. Please  
10 answer any questions Ms. Wolf may have or the  
11 Panel.

12 MS. WOLF: I don't have any questions.

13 MS. ANDINO: Okay.

14 EXAMINATION OF MS. MORRIS BY THE BOARD:

15 MS. SIEGFRIED: If you, if you have an order to do  
16 something like change a Foley and the  
17 equipment's not there, is there not some  
18 resource to -- were you aware of the order to  
19 change the Foley?

20 MS. ANDINO: Well, I think -- excuse me. The  
21 question would be directed to the witness.

22 MS. SIEGFRIED: Oh, I'm so sorry. I'm sorry.  
23 Never mind.

24 MS. MORRIS: Do you have anything for me?

25 MS. BURGESS: I have some, Madam Chair. Madam

1 Chair?

2 MS. SCAGLIONE: Yes.

3 MS. BURGESS: I have some questions if that's okay.

4 MS. SCAGLIONE: Okay. Yes, go ahead.

5 MS. BURGESS: Did Ms. Wolf tell you that she knew  
6 that the Foley Catheter was broken?

7 A. To my recollection, I cannot remember. Her notes  
8 do indicate that she wrote it up that it was  
9 broken.

10 MS. BURGESS: Okay. A fractured Foley on her shift

11 ---

12 A. Yeah.

13 MS. BURGESS: --- so she did indicate that. And  
14 she said that, that she knew that. Did she  
15 also state that she knew there was no catheter  
16 to replace?

17 A. She, she stated that there was not a catheter,  
18 catheter available at the facility at that time.

19 MS. BURGESS: And what were the -- did she talk to  
20 you about how they make those arrangements?

21 A. No, ma'am.

22 MS. BURGESS: Okay. Did you ask her?

23 A. No.

24 MS. BURGESS: And did she talk to you about the  
25 reason for the catheter?

1 A. No.

2 MS. BURGESS: Okay. Thank you.

3 MS. ANDINO: Okay. The State now calls its second  
4 witness, Ms. Rebecca Swearingen.

5 Whereupon,

6 Rebecca P. Swearingen is duly sworn and cautioned  
7 to speak the truth, the whole truth, and  
8 nothing but the truth.

9 EXAMINATION OF MS. SWEARINGEN BY MS. ANDINO:

10 Q. Please state your full name for the record.

11 A. It's Rebecca P. Swearingen.

12 Q. Can you spell your last name just for the record?

13 A. S-W-E-A-R-I-N-G-E-N.

14 Q. Okay. And Ms. Swearingen, where are you currently  
15 employed?

16 A. The Fairfield County Disabilities and Special Needs  
17 Board.

18 Q. And what are your duties there?

19 A. I'm the program coordinator, and I'm the --  
20 responsible for 12 Community Training Home IIs and  
21 then the day program.

22 Q. And how long have you been the program coordinator?

23 A. Wait a minute. Probably since, I want to say March  
24 of 2002.

25 Q. Okay. So ---

1           A.    I think.  I, I, I don't know.  I think that's right  
2                    though.  Somewhere in there.

3           Q.    Okay.

4           A.    I've worked for the Board 22 years.

5           Q.    How were you made aware of, of the incident  
6                    relating to Ms. Darleen Wolf back in November of  
7                    2007?

8           A.    All right.  Anytime anything of significance occurs  
9                    where it affects anyone living in one of our homes  
10                  -- and Wilson I and II are considered to be  
11                  medically fragile CTH IIs.  The people residing in  
12                  Wilson I and Wilson II not only have mental  
13                  retardation, but they also have extending medical  
14                  conditions that require 24-hour-a-day skilled  
15                  nursing care.  And typical -- our typical  
16                  procedures are for the -- if anything unusual  
17                  occurs on a shift, the nurse responsible is  
18                  supposed to notify the healthcare administrator or  
19                  myself if they can't get her, she's off and I'm on  
20                  call.  So when Susan Chapman came into work, she  
21                  called me and notified me that there was a problem  
22                  with Mable's catheter.

23          Q.    Okay.  And just for these proceedings we're going  
24                  to refer to the resident by her initials M.W.

25          A.    Okay.  I'm sorry.

1 Q. That's okay. And after receiving that report,  
2 what, what information did you obtain? What were  
3 you made aware of?

4 A. That the Foley had -- the bulb in the Foley had  
5 broken in the catheter and nobody, you know, hadn't  
6 been, nothing had been done about it.

7 Q. And when were you informed?

8 A. That, that morning on I guess the 6th.

9 Q. The morning of the 6th? Do you recall what shift  
10 Ms. Wolf was working that day?

11 A. Okay. Ms. Wolf was working I -- four to 12. Four  
12 p.m. to 12-midnight.

13 Q. And that was?

14 A. On the 5th, I would ...

15 Q. So four p.m. on November 5th ---

16 A. Correct.

17 Q. --- to midnight that night? Okay. And is that  
18 considered the second shift?

19 A. Yes, ma'am.

20 Q. Okay. Was Ms. Wolf a contract nurse or was she a  
21 direct employee?

22 A. She was a contract nurse.

23 Q. Okay. This incident, as you stated, occurred at  
24 Wilson I Medically Fragile CTH II, correct?

25 A. Correct, correct.

1 Q. And were you present at that facility on November  
2 5th?

3 A. I, I don't think so. I'd have to honestly look at  
4 the record to see if I was there during the day,  
5 but I don't think so.

6 Q. Do you usually go out to the facilities?

7 A. No. Not typically.

8 Q. And where are you usually located?

9 A. I -- my office is located in, at 410 West  
10 Washington in Winnsboro, South Carolina.

11 Q. So it's a different office?

12 A. Uh-huh.

13 Q. Okay.

14 A. It's a separate totally -- it's about 20, 20  
15 minutes from Wilson.

16 Q. And as the program coordinator, what actions did  
17 you take once you found out or once you had  
18 received this report from the facility?

19 A. Well, I had to file -- well, I did call the staff  
20 that was working with -- at the time to get a  
21 report from her. I do do that just so I can have  
22 verification. In this particular case, I had to  
23 file what we call a Critical Incident Report with  
24 the South Carolina Department of Disabilities and  
25 Special Needs. And that has to be timely filed.

1           There are time constraints associated with these  
2           reports, and so you, you have to have certain  
3           information when you file the reports. For  
4           example, nursing notes, any kind of information  
5           that they collect on their shift we always send  
6           those in.

7           MS. GREEN: I'm sorry. Excuse me. You said you  
8                   filed a Critical Incident Report with who?

9           A.    The South Carolina Department of Disabilities and  
10           Special Needs.

11           MS. GREEN: Okay. Thank you.

12           A.    Uh-huh.

13           Q.    And when did you file that, that Critical Incident  
14           ---

15           A.    I filed it that day.

16           Q.    And that day being?

17           A.    The 6th.

18           Q.    The 6th of November?

19           A.    Well -- yeah. Yes.

20           Q.    The 6th of November?

21           A.    Yeah.

22           MS. GREEN: 2007?

23           Q.    2007, yes. And you were, you were starting to, to  
24           explain a little bit as to what, what a Critical  
25           Incident Report. Can you elaborate a little bit as

1 to what, what that is?

2 A. A Critical Incident Report is required by DDSN if  
3 something unusual occurs with the consumer that we  
4 provide services to that could affect their life  
5 safety. It could, it could be a visit to the ER.  
6 It could be -- a critical incident could be if, if  
7 a vehicle was, one of our vehicles was involved in  
8 a, in a even a minor accident, a false alarm at one  
9 of our residences and the fire department came. So  
10 anytime EMS or the police or the fire department  
11 respond, it's a critical. But then there are also  
12 other situations where if it affects the life  
13 safety of a consumer then we have to file a  
14 Critical Incident.

15 Q. Okay. And is there just one report that you file  
16 with the State?

17 A. You file two reports. The first one is an Initial  
18 Critical Incident Report. That's giving them just  
19 the basic facts of why you're filing, you know, why  
20 you're reporting to them. The Final Critical  
21 Incident Report has to be filed five days from the  
22 date the first one was filed. And during that  
23 five-day period, you can be on a fact-finding  
24 mission to try and determine exactly what happened,  
25 how did it happen, and what can -- and part of the

1 Final Critical Incident Report is they want to know  
2 what can you do, do to prevent it from happening  
3 again. So it's kind of like a quality assurance  
4 section of the report.

5 Q. Okay. And does the, the State have the discretion  
6 of either accepting or, or rejecting that part of  
7 the report?

8 A. They, they typically if they're, if there's what  
9 they call -- and they like to refer to it this way:  
10 a red flag event, they can notify us either by e-  
11 mail or by telephone or by letter, by fax and give  
12 us further instructions.

13 Q. In this case, with regards to ---

14 A. In this case, we were instructed to file a report  
15 with the Nursing Board.

16 Q. Okay. So they accepted your, your report?

17 A. Yes. Yes. But they called me and, and told me I  
18 need to call, I need to file a report with the  
19 Nursing Board.

20 Q. Okay. And you previously stated that in, in doing  
21 your report, you obtained resident records. Did  
22 you have an opportunity to review those records for  
23 this matter?

24 A. Yes, I did.

25 Q. Let me show you State's Exhibit 3. Do you

1 recognize these, this resident's records?

2 A. This is a Physician's Order Form.

3 Q. Just in, in -- as a whole. The record, is that  
4 what ---

5 A. This is -- yes, ma'am.

6 Q. --- you had an opportunity to review?

7 A. Yes, uh-huh.

8 Q. Okay. If you can look into those records around  
9 page 7, the numbers are at the top in red.

10 A. Oh, okay.

11 Q. Page 7.

12 MS. GREEN: Excuse me. Ms. Andino, did she have an  
13 opportunity to review?

14 A. Yes, ma'am.

15 MS. ANDINO: Yes. It was, it was State's Exhibit  
16 3. We've already entered it.

17 A. Okay.

18 MS. GREEN: She has Exhibit 3?

19 MS. ANDINO: Uh-huh.

20 A. Uh-huh.

21 Q. Will you refer to page 7? In the bottom, you'll  
22 see there's an entry made on November 5th, 2007.  
23 What is the time of, of that entry?

24 A. The time of the entry is 2330 hours.

25 Q. Okay. And can you read that entry, just what you

1 can make out?

2 A. Okay. It says comfort measures in place; Foley  
3 Catheter output 275 ccs; cloudy, amber colored --  
4 and I'm not sure what the -- something to gravity  
5 bag; catheter bulb noted to be broken; briefs on at  
6 this time; wait replacement catheter arrives.

7 Q. Okay. And can you identify whose, whose nursing  
8 notes -- who made that note?

9 A. It, it appears to be Darleen Wolf.

10 Q. Okay. And based on Ms. Wolf's nursing notes from  
11 that section that you just read out, did, did the  
12 note reflect that she replaced the catheter?

13 A. It was replaced later that day, I think or when the  
14 eight to four nurse came on. But not according to  
15 these notes.

16 Q. Not according to ---

17 A. Yeah. They were not -- it wasn't replaced on this  
18 shift by this nurse that signed these notes.

19 Q. Did you speak with Ms. Wolf ---

20 A. No, I did not.

21 Q. --- about this incident?

22 A. No, I did not.

23 Q. And what is your procedure when something like this  
24 happens?

25 A. When an event occurs where a service agency is

1           contacted and they assign a nurse to work at our  
2           facilities, we contact the company. We contact the  
3           service agency nursing company that provided the  
4           nurse and assigned them to work in our facility.

5           Q.    And that's what you did with this situation?

6           A.    Yeah, yes. Uh-huh.

7           Q.    So you had no personal contact with Ms. Wolf? You  
8           didn't have the opportunity to ask her any  
9           questions about the incident?

10          A.    No, huh-uh.

11          Q.    Okay. To your knowledge, did Ms. Wolf ever return  
12          to work at the Disabilities ---

13          A.    No, no.

14          Q.    Okay. And to your knowledge, did this resident  
15          receive the replacement catheter?

16          A.    Yes. I mean, by somebody else.

17          Q.    Okay. Do you have any other knowledge or any other  
18          information that you can provide with regards to  
19          this matter?

20          A.    No, ma'am.

21          Q.    I don't have any further questions. Please answer  
22          any questions Ms. Wolf or the Panel may have for  
23          you.

24                MS. WOLF: I have no questions.

25          A.    Okay.

1 EXAMINATION OF MS. SWEARINGEN BY THE BOARD:

2 MS. SIEGFRIED: Do you have a procedure for  
3 accessing equipment in the event that it's not  
4 there?

5 A. The, the equipment -- well, it's up to the -- if  
6 something's not, if something is not present, the  
7 nurses are supposed to let us know. We have, I  
8 mean, we have companies that we have contracts with  
9 that provide it on a, a recurring schedule. I  
10 mean, but if it's something in particular that, you  
11 know, typically they don't put on a -- what do they  
12 call it, a recycle fill? Then, you know, a phone  
13 call -- the nurse either needs to fax it in or, or,  
14 or call somebody and let them know.

15 MS. SIEGFRIED: And how, how, how quickly would you  
16 get that if you called and asked for a piece  
17 of equipment?

18 A. Oh, we can -- it -- well, I mean it -- something  
19 like a Foley Catheter we can get within hours. I  
20 mean, you know, it doesn't take very long to get  
21 it.

22 MS. SIEGFRIED: And is there somebody available for  
23 this fax receipt 24 hours a day?

24 A. I'm, I'm sorry, I didn't hear you.

25 MS. SIEGFRIED: Is there someone available for this

1 fax request 24 hours a day?

2 MS. SCAGLIONE: To receive the equipment?

3 MS. SIEGFRIED: To get the request for the, for the  
4 equipment?

5 A. My answer to that is probably no.

6 MS. SIEGFRIED: Is there a supervisor that ---

7 A. There is a supervisor on, on call 24 hours a day.  
8 It's either the healthcare administrator or it's  
9 myself.

10 MS. SIEGFRIED: Is there anybody on site itself?

11 A. No.

12 MS. SIEGFRIED: Okay. Do you know ---

13 A. But I mean, I -- can I expand on your question? I  
14 got, I get phone calls all time of the, of the  
15 night. Day and night from Wilson I and II and the  
16 other ten homes. I mean if somebody -- if there's  
17 something going on, everybody has my agency cell  
18 phone number. It's posted. Everybody knows it.  
19 I've even had nurses call my personal home phone at  
20 two and three o'clock in the morning.

21 MS. SIEGFRIED: This -- Mrs. Wolf was a, an agency  
22 nurse. What kind of orientation did she have  
23 to come to work there?

24 A. Well, originally we set up where we had a book that  
25 we had sent to each nursing company. And in it

1           were -- it was -- we had all of our forms. We had  
2           emergency procedures in there. And then I think we  
3           also had some things as far as internally that we  
4           had outlined. I do know there were problems with  
5           the companies not carrying the information out.

6           MS. SIEGFRIED: Do you know if Mrs. Wolf was deemed  
7           competent?

8           A. I, I couldn't, I couldn't -- I don't know. I  
9           couldn't tell you that, ma'am. I just know we sent  
10          the information to the different service agencies  
11          that we use.

12          MS. SIEGFRIED: And you don't know, you don't know  
13          her competence to know the policies and the  
14          procedures and rules and practices of the ---

15          A. No, ma'am.

16          MS. SIEGFRIED: What was, what was broken on the  
17          Foley?

18          A. As I, as I understood, it was the bulb on the Foley  
19          Catheter.

20          MS. SIEGFRIED: And so it was slipping or?

21          A. From what I understood -- from what I could tell in  
22          my notes, the actual bulb was broken. Now, I'm not  
23          a nurse. So what that means I don't know. I can  
24          only go by what I was told by other nurses.

25          MS. SIEGFRIED: So what was the outcome of that?

1                   What happened? I mean, what was the symptoms  
2                   the patient had?

3           A.    I'm not a nurse, ma'am. You know, I just, I can't  
4           go to a nursing question.

5           MS. SIEGFRIED: I'm just wondering ---

6           A.    I don't know.

7           MS. SIEGFRIED: --- why that, why did you even  
8           think that it was broken?

9           A.    Because that's what I was told.

10          MS. SCAGLIONE: In the, in the notes Ms. Wolf wrote  
11               that the catheter would arrive the next day  
12               per Hospice. Why would Hospice be bringing  
13               the Foley Catheter?

14          A.    Because Ms., Ms. M.W. was receiving Hospice  
15               services.

16          MS. SCAGLIONE: So they bring in all equipment that  
17               -- associated with the Hospice, Hospice  
18               patient that may be needed?

19          A.    No.

20          MS. SCAGLIONE: No. Okay.

21          A.    I think that's just her note. Typically we get the  
22               equipment. We have a cabinet out in the garage.

23          MS. SCAGLIONE: Right.

24          A.    Each cabinet has the, each persons name on it. All  
25               their durable medical equipment is in the cabinet

1 in each garage at each house at Wilson I and Wilson  
2 II.

3 MS. SCAGLIONE: I see that it's ordered every month  
4 for the Foley Catheter to be changed. Do you  
5 know if this is, if the resident M.W., is this  
6 the first patient's catheter change or how  
7 long has she had the catheter?

8 A. No. I couldn't speak to that, ma'am. I, I ...

9 MS. SCAGLIONE: Would, would you say it's a, it's  
10 normal for the residents of the, of, of this  
11 home to have indwelling Foley Catheters? Is  
12 that a normal thing for patients? Okay.

13 A. Yeah. Yes, ma'am. We have a number of people with  
14 them.

15 MS. SCAGLIONE: So, so all the equipment is in a  
16 little cabinet for each patient?

17 A. It's in a great big huge cabinet.

18 MS. SCAGLIONE: Okay.

19 A. I mean, it's not a big thing -- it goes floor to  
20 ceiling ---

21 MS. SCAGLIONE: Okay.

22 A. --- in the garage and it has one big door, but then  
23 it has like two levels to it. And each person has  
24 one big section on those levels because it's  
25 separated from like durable medical equipment like

1           syringes and Foley Catheters, and then below is  
2           other stuff like Peri-Wash or whatever.

3           MS. SCAGLIONE: Right. So there's no central one  
4           area a nurse could go in and open up a door  
5           and there'd be all this different type of  
6           equipment?

7           A. They can get those, they can get anything out of  
8           those cabinets that they need and they can  
9           replenish their stock inside the house. It, it's,  
10          it's really kind of up to them. If they want to go  
11          get it, I mean the garage is right there.

12          MS. SCAGLIONE: Uh-huh.

13          A. It's connected to the house. It's not like you  
14          have to walk a hundred yards or something. It's  
15          just like the nurses station is right here and the  
16          garage door is right here. You just go in the  
17          garage and there are the cabinets. And, but if  
18          they want to go out to the cabinets and get durable  
19          medical equipment or supplies and put it in the  
20          cabinets inside the house, they can do that.

21          MS. SCAGLIONE: Would your policy prevent one of  
22          the nurses taking of a Foley Catheter that --  
23          from someone else's drawer and using it on a  
24          different patient? What would be the  
25          procedure if that was done?

1 A. If it's ---

2 MS. SCAGLIONE: --- if it was needed.

3 A. --- I mean, if, if somebody needed something and it  
4 hadn't been used and it was sterile, what we would  
5 have to do is they would have to let us know and  
6 we'd have to replace that person's item.

7 MS. SCAGLIONE: Right.

8 A. And I have gotten calls for that. Because, you  
9 know, we have to process the paperwork.

10 MS. SCAGLIONE: Sure. Okay. No further questions  
11 for the program coordinator. Any other  
12 questions?

13 MS. BURGESS: I do.

14 MS. SCAGLIONE: Okay.

15 MS. BURGESS: Who licensed these facilities?

16 A. Pardon me?

17 MS. BURGESS: Who licensed these ---

18 A. The South Carolina Depart -- excuse me, it just  
19 recently changed. But during this time period, it  
20 was the South Carolina Department of Disabilities  
21 and Special Needs.

22 MS. BURGESS: Okay.

23 A. It is now DHEC.

24 MS. BURGESS: Okay. And these are folks who have  
25 MR or dementia or whatever with chronic

1 diseases? And you said they required skilled  
2 nursing care?

3 A. Yes, ma'am.

4 MS. BURGESS: So having said that -- and really my  
5 questions are along the line of the previous  
6 Panel member's questions -- your supply closet  
7 in the garage is an open supply closet for  
8 ever -- I mean, is it or is it designated per  
9 patient? Tell me about ---

10 A. Yes. It's designated by patient.

11 MS. BURGESS: So do you keep extra supplies in  
12 there for patients if they need them? For  
13 example, I noticed this patient had a PEG. So  
14 if that PEG were to come out during the middle  
15 of the night.

16 A. The PEG tube we have had where -- it just depends  
17 on the situation. Like, there again, I'm not a  
18 nurse.

19 MS. BURGESS: But what I want to know is about the  
20 supplies. What do you keep on hand and would  
21 be extra in case, for example, a patient  
22 pulled their Foley out or whatever? Do you  
23 have those ---

24 A. We're supposed to, we are supposed to have all that  
25 stuff.

1 MS. BURGESS: And if there isn't one, what is your  
2 policy and procedure for the nurse on duty to  
3 obtain that?

4 A. Well, honestly, they're supposed to call us.

5 MS. BURGESS: But is there a policy ---

6 A. If we didn't get a phone ---

7 MS. BURGESS: --- written to that effect? For  
8 example, I come on and I come work in your  
9 facility and a patient pulls their Foley out  
10 or whatever. So how am I ---

11 A. They're supposed ---

12 MS. BURGESS: --- how do I get one ---

13 A. They're ---

14 MS. BURGESS: --- if I go to the supply closet and  
15 there isn't one?

16 A. --- okay if that -- if that occurs, they're  
17 supposed to call. If we don't have it there, then  
18 we need to send them out and get it replaced. In  
19 other words, we need, you know, if, if, if  
20 somebody, if -- if something like this happens and  
21 there were no supplies, then they need to call  
22 whoever the administrator is on call and then we  
23 would have to get them somewhere to get whatever it  
24 is they needed to have it done.

25 MS. BURGESS: And they know this? The nurses on

1 call?

2 A. Yes, ma'am.

3 MS. BURGESS: Or whoever's working?

4 A. Uh-huh.

5 MS. SIEGFRIED: Agency staff also?

6 A. Agency staff? You mean ---

7 MS. BURGESS: Whoever's working with the patients?

8 A. Right. Like I said, I've received phone calls from  
9 a many, many, many different -- our employees, our  
10 nurses, and service agency nurses.

11 MS. BURGESS: Okay.

12 MS. SCAGLIONE: Has Ms. Wolf ever called you before  
13 for any other, excuse me, Stephanie. Does  
14 that answer your question?

15 MS. BURGESS: That's okay. Go ahead.

16 MS. SCAGLIONE: Has Ms., Ms. Wolf ever called you  
17 before for, for a supply at home?

18 A. I'm -- that was back in 2, I couldn't tell you. I  
19 couldn't remember.

20 MS. SCAGLIONE: How long was Ms. Wolf employed with  
21 you all?

22 A. She wasn't employed by us.

23 MS. SCAGLIONE: How long have you been using as an,  
24 as agency staff prior to this incident?

25 A. I didn't research that information.

1 MS. SIEGFRIED: Do you know if she had any other  
2 complaints of, of care? Do you know?

3 A. You know I hate to -- I would say off the top of my  
4 head no. But I, I really can't even -- I shouldn't  
5 even say that. What I should say is, without  
6 researching it, I really can't answer that  
7 question.

8 MS. SCAGLIONE: Did you talk to Ms., Ms. Wolf the  
9 next day after the incident at all? Have you  
10 ever had a conversation with her personally  
11 about what might have happened?

12 A. I don't remember having a conversation with her. I  
13 know we called her employer or whoever she was  
14 working for.

15 MS. SCAGLIONE: Well, what was the recommendation  
16 after you did your Critical Incident?

17 A. Well they -- anytime any -- if it's a service  
18 agency person -- it's a lot different for somebody  
19 ---

20 MS. SCAGLIONE: Right.

21 A. --- who's a service agency than our own employee.

22 MS. SCAGLIONE: I understand.

23 A. But if it's a service agency person, we notify the  
24 companies and they cannot come back to the  
25 facility.

1 MS. SCAGLIONE: The last question that I have is,  
2 when you did your Critical Incident, what did  
3 your facility decide to do to prevent this  
4 occurrence in the future or was just the  
5 recommendation ---

6 A. I mean.

7 MS. SCAGLIONE: --- to take this to the State  
8 Board?

9 A. Well, they, I mean that was -- can I read it?

10 MS. SCAGLIONE: Yes. That'd be helpful.

11 A. Because I can't -- I said that the Quality  
12 Assurance Risk Committee and Safety Committee would  
13 review this incident in November to determine the  
14 steps that the Fairfield County DSM Board can take  
15 in order to ensure an incidence of this nature is  
16 not repeated. In addition, the healthcare  
17 administrator's holding a staff meeting for all  
18 nurses and agencies who provide nursing services  
19 for Wilson I and II on November 20th, 2007.

20 MS. SCAGLIONE: Holding a staff meeting, so, so  
21 they can let them know how to get supplies?  
22 Do you know what the staff meeting was about  
23 or?

24 A. I, I, I didn't bring -- if I'd -- I didn't bring  
25 those minutes from the staff meeting.

1 MS. SIEGFRIED: Do you know the results of the  
2 quality review?

3 A. I didn't bring those minutes either. What -- I  
4 know -- I hope you don't misunderstand me, but this  
5 was 2007. The QA Committee, which is what this is  
6 referring to, meets every single month. And I, you  
7 know, I just don't have those minutes.

8 MS. SCAGLIONE: Okay. Do you know if there is any  
9 other -- well, let's see if I can ask this --  
10 any other equipment, problems obtaining of  
11 equipment since this particular incident in  
12 2007?

13 A. No.

14 MS. SCAGLIONE: None? Had there ever been prior  
15 problems ---

16 A. The only, you know, let me, let me -- I shouldn't  
17 have said no.

18 MS. SCAGLIONE: Okay.

19 A. Okay. We do have one resident that has a PEG tube.  
20 The PEG tube did come out. She was sent to the ER.  
21 She did have to have it surgically reinserted.

22 MS. SCAGLIONE: Okay.

23 MS. BURGESS: One more question, Madam Chair. I  
24 just want to clarify there is a policy and a  
25 procedure that when there's equipment failure

1 or a patient pulls out there equipment,  
2 whatever. On that particular shift, there's a  
3 policy and a procedure that they know to call  
4 the administrator on call to either (A) get  
5 the equipment ASAP or send the patient to an  
6 appropriate provider to have that attended to  
7 immediately. Is that correct?

8 A. Right.

9 MS. BURGESS: Okay. That's what I needed to know.

10 A. I need to say it's, it's, is it a formal policy in  
11 writing?

12 MS. BURGESS: Yes. That's what I'm asking.

13 A. Okay. I didn't -- all right. Well, let me clarify  
14 that. I'm, I'm not in charge anymore. Our nursing  
15 services administrator is. But we did at one time.  
16 I think more now it's verbal, you know.

17 MS. BURGESS: But in 2007, was there something  
18 written saying ---

19 A. There was, there was ---

20 MS. BURGESS: --- if I came there too as an agency  
21 nurse, how would I know what to do?

22 A. There was, there was information posted down there,  
23 yes. And it was available. And, and like I said,  
24 people call me all the time.

25 MS. SIEGFRIED: Posted where?

1           A.     In, in the nurse's station. I mean, we have  
2                    notices posted everywhere: who to call and, you  
3                    know, who's on call, the schedule.

4           MS. BURGESS: I'm -- right. But what I'm asking is  
5                    I'm on call, or I come to your agency and work  
6                    as a nurse.

7           A.     Uh-huh.

8           MS. BURGESS: Somebody pulls their PEG out or they  
9                    pull their Foley out or -- they do those  
10                   things all the time. What I'm asking is is  
11                   there something written that would tell me  
12                   what to do in order to get that patient taken  
13                   care of? That's what I'm asking. Would,  
14                   would, would I know as a nurse ---

15          A.     Well, it was supposed to be ---

16          MS. BURGESS: --- I mean, I know what to do.

17          A.     Okay.

18          MS. BURGESS: But what I'm asking you is ---

19          A.     Yeah.

20          MS. BURGESS: --- what is your policy for your  
21                    facility?

22          A.     And like I said, it was supposed to -- it was sent  
23                   to the companies. Whether or not they shared it, I  
24                   don't now.

25          MS. BURGESS: Okay. That's what I wanted to know.

1 Thank you. Thank you very much.

2 MS. SCAGLIONE: Anything else for her?

3 MS. SIEGFRIED: I'm good.

4 MS. BURGESS: No, I'm good. Thanks.

5 MS. SCAGLIONE: Thank you.

6 MS. ANDINO: Do you have any questions for her?

7 MS. WOLF: No, I don't.

8 MS. ANDINO: Okay. The State will call its next  
9 witness, Ms. Pearline Livingston.

10 Whereupon,

11 Pearline M. Livingston is duly sworn and cautioned  
12 to speak the truth, the whole truth, and  
13 nothing but the truth.

14 EXAMINATION OF MS. LIVINGSTON BY MS. ANDINO:

15 MS. ANDINO: If you give me just a moment, I think  
16 she actually took the exhibits, the last witness,  
17 sorry.

18 (Off the record briefly).

19 Q. Ms. Livingston, can you please state your full name  
20 for the record?

21 A. Yes, ma'am. My name is Pearline M. Livingston.

22 Q. Can you spell your first name please?

23 A. P-E-A-R-L-I-N-E.

24 Q. Okay. And Ms. Livingston, where are you currently  
25 employed?

1 A. I work -- I'm employed at Fairfield Disabilities  
2 Board.

3 Q. And what are your duties there?

4 A. My title is a CHT Counselor II, but my duties are  
5 I'm a direct care worker.

6 Q. And what does that mean, direct care worker?

7 A. Okay. I do the ADLs as in bathing. I prepare -- I  
8 bathe and dress, and transfer if, if they're up to  
9 transfer to a wheelchair or whatever. Then I, I  
10 prepare meals. I serve. I feed. And we have  
11 documentation. We have things that are  
12 accountability supervision level and BSPs that we  
13 have to document on the consumers during the day.

14 Q. Okay. Okay. And how long have you worked there at  
15 the Disability and Special Needs Board?

16 A. I think tomorrow will be five years.

17 Q. Okay. Are you a nurse?

18 A. No, ma'am. I'm not.

19 Q. You, you're not? Okay.

20 A. No, I'm not.

21 Q. And were you present at Wilson I CTH II on November  
22 5th, 2007?

23 A. Yes, ma'am.

24 Q. And what shift were you working that day?

25 A. I had to go back and look because its been a while.

1 Q. Uh-huh.

2 A. But I went back and looked in the log book that we  
3 sign in on and I worked that night from 12 to  
4 eight.

5 Q. 12-midnight?

6 A. Yes, ma'am. To eight a.m..

7 Q. On the 6th?

8 A. Yes.

9 Q. So from 12-midnight on November 5th to eight a.m.  
10 November 6th?

11 A. Yes, ma'am.

12 Q. Okay. And when you arrived for your shift, did,  
13 did you go and check on your residents?

14 A. Yes. We do, it's called where I work a walk  
15 through. The shift before me -- the direct care  
16 staff like myself.

17 Q. Uh-huh.

18 A. And we do a walk through and then we give like what  
19 a report is whatever happened during that shift.

20 Q. Okay. And that's procedure; that's typically done  
21 for all residents?

22 A. Yes, ma'am.

23 Q. Okay. If you can take a look at that document  
24 there, it's State's Exhibit Number 3. I, I want  
25 you to look at it just in order to identify the

1 resident. We're going to just refer to the  
2 resident with the initials M.W. Look through that  
3 and tell me if, if you remember caring for that  
4 resident, the resident referred to in that exhibit.

5 A. I'm just looking through here, but yes. From the  
6 first page I remember caring for this consumer.

7 Q. Okay. And with regards to that resident identified  
8 in State's Exhibit 3, do you recall checking on  
9 that, checking in on that particular resident when  
10 you came on shift?

11 A. Yes.

12 Q. That day?

13 A. Yes.

14 Q. Okay. And when you went to check in on her, what -  
15 - was there anything about her condition that, that  
16 caught your attention?

17 A. For one thing, the Foley bag wasn't on the bed, you  
18 know, like visible on the bed.

19 Q. The Foley bag?

20 A. The catheter bag.

21 Q. It wasn't on the bed?

22 A. No.

23 Q. Okay. And to your knowledge was she supposed to  
24 have a Foley Catheter in place?

25 A. If memory serves me correctly, because it has been

1 two years. I remember, you know, some things and  
2 some are not so clear. But that's, that's -- that  
3 part I do remember because the bag wasn't there.

4 Q. Okay. But to your recollection she was supposed to  
5 have a Foley Catheter in place?

6 A. To, to my knowledge she was supposed to have one.

7 Q. And when you saw that the catheter wasn't in place  
8 for that resident, did you contact the nurse on  
9 duty?

10 A. No. After we did the walk through -- if I can  
11 remember right, that's when -- well, we have is a  
12 report was given to what happened during the shift  
13 before mine. And I'm pretty sure that's when we  
14 were told that Ms. W's Foley came out.

15 Q. So you, you were told by report? Was that a verbal  
16 report ---

17 A. Yes.

18 Q. --- that you received?

19 A. Yes.

20 Q. And that's when you learned that Ms. -- the  
21 resident's catheter was not in place?

22 A. Yes.

23 Q. But you, you stated that you did a walk through and  
24 then you noticed it -- that it wasn't in place. So  
25 you confirmed that, correct?

1 A. Uh-huh.

2 Q. Do you know Ms. Wolf?

3 A. I've worked with Ms. Wolf.

4 Q. To your recollection, do you remember seeing her on  
5 that date?

6 A. Yes.

7 Q. Did you have any interaction with her regarding  
8 this resident on that date?

9 A. You said me as in me specifically? Because ---

10 Q. Yes. You yourself.

11 A. Let me think because -- okay. The area in which  
12 we're in to give the report --I'm going to say  
13 report -- but the, whatever happened on the, the  
14 shift before, is everywhere we all four would've  
15 been because as the, the, the nurse that's leaving,  
16 the nurse who's coming on, the staff that's  
17 leaving, and me, the staff that's coming on. So I  
18 don't know what you mean if she told it to me  
19 specifically. It, it would've been said in the  
20 midst of us all.

21 Q. Okay. Do you know -- just to sum up your testimony  
22 so far, you said that you received verbal report  
23 that the catheter was not in place. When you did  
24 your walk through, you noticed that -- you verified  
25 it yourself that it wasn't in place, correct?

1 A. Yes.

2 Q. Do you know where a replacement catheter would be  
3 stored?

4 A. Yes.

5 Q. And where would that be?

6 A. We have what's like a garage, but they have  
7 cabinets built in it. Each cabinet has a  
8 consumer's name on the outside of it. It has a key  
9 to it -- it has a lock to it and that's where their  
10 medical supplies are kept.

11 Q. Okay. To your recollection, you don't recall  
12 speaking with Ms. Wolf regarding the catheter not  
13 being in place or where a replacement catheter  
14 would be?

15 A. Let's see. If I can remember, if I can remember,  
16 when it was said that it wasn't there and the  
17 reason why it wasn't in, again, because I think I  
18 remember her saying she didn't know where it was or  
19 where they kept them. Because I remember telling  
20 her or walking out to the garage to show her this  
21 is where. I think I opened the door. I think I  
22 opened the door.

23 Q. Do you have a question?

24 MS. GREEN: No. I'm, I'm just saying something to  
25 myself. I apologize, I apologize. I'm

1                    thinking. I'm, I'm in the twilight zone. I  
2                    apologize.

3            A.    Okay. Because the room where the nurses are and  
4            the, and the last room, the door to the garage is  
5            right there. And if I remember correctly, I opened  
6            the door and, I mean, everything that the consumers  
7            has to use is in there: the gloves, the feedings,  
8            the everything. And that's where I, you know, told  
9            her that's where the stuff was.

10          Q.    So you told Ms. Wolf that the catheter or the, the  
11          equipment for the resident would be located in that  
12          cabinet?

13          A.    Yes.

14          Q.    Just to clarify, did you, did you say that you took  
15          her to the storage?

16          A.    No, I did not.

17          Q.    Okay. So you just told her that it would be in the  
18          storage area?

19          A.    Yes.

20          Q.    Did you yourself go to the cabinet to see if there  
21          was a catheter there?

22          A.    No, not at this time. Because, if I can remember  
23          correctly ---

24          Q.    Uh-huh.

25          A.    --- that would've meant Ms. Wolf was leaving and

1           that the next nurse was coming on.

2           Q.    Okay.  Just from, from your knowledge, what were  
3           the resident's medical conditions from what you can  
4           recollect on that resident?

5           A.    From my memory, I remember Ms. W. was really sick.  
6           If I can remember, she was sent out to, to see a  
7           doctor maybe a couple of days, something like that  
8           -- excuse me, excuse me -- before that.  That's  
9           when she came back with the Foley.  Not very much  
10          was told to direct care staff.  Most of the  
11          information that came when, when our consumers go  
12          to the doctor was handled by the nurse.  What, what  
13          we are usually told for something we needed to be  
14          told.  But knowing -- Ms. W. was there a while.  
15          She was there four or five years ago.  The company  
16          I work for now, another company ran it.

17          Q.    Uh-huh.

18          A.    So you know, I kind of knew her a while.  That's,  
19          that's why this sticks out with me, you know.  I  
20          can remember some things about this, because I  
21          would, I know her, I knew her for a while.  And  
22          when you know somebody for a while, you kind of be  
23          really, really, really interested.  But only thing  
24          we knew, only thing I knew is that she was sent out  
25          to the doctors.  She came back with the Foley,

1           because there wasn't supposed to be any urine left  
2           in her. So they got a Foley bag to just drain it  
3           all out.

4           Q.    Okay. I don't have any further questions. Please  
5           answer any questions the Panel may have or Ms.  
6           Wolf.

7           MS. WOLF: I don't have any.

8           MS. ANDINO: You don't have any questions? Okay.

9           EXAMINATION OF MS. LIVINGSTON BY THE BOARD:

10          MS. SCAGLIONE: During your shift, which started at  
11                  midnight, correct?

12          A.    Yes, ma'am.

13          MS. SCAGLIONE: Did, did you work with a nurse,  
14                  usually work with a nurse?

15          A.    Yes, ma'am.

16          MS. SCAGLIONE: Okay. Did you have a conversation  
17                  with that nurse about the Foley Catheter at  
18                  all?

19          A.    That nurse that I worked with?

20          MS. SCAGLIONE: Right, on your shift.

21          A.    Yes, I did.

22          MS. SCAGLIONE: Can you tell me what the, what the  
23                  conversation may have been, been about? Did  
24                  you have a discussion that there would -- that  
25                  the Foley Catheter was out and that -- I don't

1                   want to put words into your mouth.

2           A.     Okay. Yeah. Let me think. Yeah. We -- yeah.

3                   It, it was a discussion because it wasn't back in.

4           MS. SCAGLIONE: Okay.

5           A.     When it came to her, when it came to her, the nurse  
6                   that I worked with, I, I went into the garage.

7           MS. SCAGLIONE: On your shift?

8           A.     Yes, ma'am.

9           MS. SCAGLIONE: Okay. And?

10          A.     It was something -- some confusion about it because  
11                  -- I can't remember what she said but I told her, I  
12                  said well I'm, I'm a direct care worker and if you  
13                  need to know anything else, we have a healthcare  
14                  administrator or my super, like the supervisor over  
15                  stuff that would know where stuff would be and I  
16                  wouldn't know. So that's what I suggested that she  
17                  do.

18          MS. SCAGLIONE: Do you know if the nurse on your  
19                  shift went into the garage to check to see if  
20                  there was a Foley Catheter?

21          A.     I'm, I'm thinking because I want to be, I want to  
22                  be right. I think she did. I'm, I'm pretty sure  
23                  she did because, because -- okay, it's, it's like  
24                  this. This -- that area that I just explained with  
25                  the door right there going into the garage. Well,

1           it's a area right before there and it's kind of  
2           separates direct care staff like myself from  
3           nursing staff. It's kind of like two different  
4           places. So where the conversation took place was  
5           where I was sitting where my little desk area is,  
6           where my books and stuff that I write in. So she  
7           went out of my area. I'm not sure if she went to  
8           her desk or she went into the garage.

9           MS. SCAGLIONE: How -- do you know -- how long had  
10           you been working with, with this particular  
11           nurse on your shift?

12          MS. ANDINO: Can, can I just interject so that  
13           we're clear. Are you referring to Ms. Wolf or  
14           ---

15          MS. SCAGLIONE: No.

16          MS. ANDINO: --- the ---

17          MS. SCAGLIONE: The ---

18          MS. ANDINO: --- the nurse on her shift?

19          MS. SCAGLIONE: --- the nurse on your shift, Ms.  
20           Linda?

21          A.    The 12 to eight nurse.

22          MS. SCAGLIONE: Right. How long have you ---

23          A.    Ms., Ms. Prater.

24          MS. SCAGLIONE: Right. How long have you worked  
25           with Ms. Prater?

1           A.     I worked with her a couple days. Like maybe a  
2                     week.

3           MS. SCAGLIONE:   A week?

4           A.     During, during the week, maybe three or four times.  
5                     That wasn't the first time I worked with her.

6           MS. SCAGLIONE:   Okay. Would you, would you say  
7                             it's safe, safe to say that she would know to  
8                             go look in the, into the garage for the Foley  
9                             Catheter? Did she know -- you've seen her go  
10                            in there before for different supplies?

11          A.     Yes, ma'am.

12          MS. SCAGLIONE:   Okay. Thank you.

13          MS. SIEGFRIED:   Do you know if the patient had  
14                             urine through the night?

15          A.     Did she like wet?

16          MS. SIEGFRIED:   Uh-huh.

17          A.     Yes, she did.

18          MS. SIEGFRIED:   So the patient did wet the bed and  
19                             the bed had to be changed?

20          A.     Yes, ma'am.

21          MS. SIEGFRIED:   Okay. More than once?

22          A.     Yes, ma'am.

23          MS. BURGESS:     Can I ask some questions?

24          A.     Excuse me.

25          MS. BURGESS:     Hey.

1 A. Hello.

2 MS. BURGESS: I just want to clarify. You, you  
3 came on shift at 12. Your shift was 12 to  
4 eight or something like that, correct?

5 A. Yes. Yes, ma'am.

6 MS. BURGESS: The graveyard shift.

7 A. Yeah.

8 MS. BURGESS: That's what I used to work. Who told  
9 you that the catheter was out? Or who told  
10 you all in report? You said you heard that in  
11 report.

12 A. Yes, yes. Ms. -- the, the nurse that was, was  
13 leaving, Ms. Wolf.

14 MS. BURGESS: Okay. That's what I needed to know.  
15 And did they elaborate what they had done to  
16 obtain or do anything about that? Do you  
17 recall any conversation about that?

18 A. I -- there was something. Like I said, I'm, I'm --  
19 there was something. There was a reason given.  
20 I'm not at all clear what it was or why it wasn't  
21 put back in. You know, like I just -- I remember  
22 how it was going. Like Ms., Ms. W.'s catheter came  
23 out, but. I don't know if the but was she didn't  
24 know where it was or ---

25 MS. BURGESS: She didn't know where what was?

1 A. The catheter.

2 MS. BURGESS: The replacement or the one that was  
3 yanked out?

4 A. No. The one -- was yanked out?

5 MS. BURGESS: Well, fell out, whatever. I don't  
6 know. You said ---

7 A. Yeah, they say it came out. I'm ---

8 MS. BURGESS: Okay. Came out. The one, which one  
9 are you talking about?

10 A. I'm talking about the one that wasn't never in yet.  
11 The one that was in the kit that would've been in  
12 the supply closet with her supplies, with Ms. W's  
13 supplies.

14 MS. BURGESS: Okay. And you saw that replacement  
15 catheter?

16 A. No, I didn't.

17 MS. BURGESS: Okay. That's all I have.

18 MS. ANDINO: Do you have any?

19 MS. WOLF: I'm fine, thank you.

20 MS. ANDINO: I don't have any further questions.

21 You, you can step down. And at this time the  
22 State will call its last witness, Mary Mills.

23 Whereupon,

24 Mary Mills is duly sworn and cautioned to speak the  
25 truth, the whole truth, and nothing but the truth.

1 EXAMINATION OF MS. MILLS BY MS. ANDINO:

2 Q. Please state your full name for the record.

3 A. Mary Dawn Ruth Mills.

4 Q. And Ms. Mills, where are you currently employed?

5 A. Jesse Frank Hawkins Nursing Home in Newberry, South  
6 Carolina.

7 Q. And how long have you been there?

8 A. October, it'll be a year.

9 Q. Okay. And are you a registered nurse or an LPN?

10 A. LPN.

11 Q. And did you ever work at Wilson I CTH II?

12 A. Yes, I did.

13 Q. And how long were you employed there?

14 A. Not quite a year.

15 Q. Almost a year?

16 A. Almost a year.

17 Q. Okay. Were you working there on November 6th,  
18 2007?

19 A. Yes.

20 Q. Okay. And what shift were you working that day?

21 A. I worked first shift, eight to four.

22 Q. Eight a.m. to four p.m.?

23 A. Eight a.m. to four p.m.

24 Q. On the 6th?

25 A. Right.

1 Q. You have in front of you what's State's Exhibit  
2 Number 3. If you can please review that and let me  
3 know if you recall caring for the resident, that  
4 resident. We're going to refer to her by her  
5 initials M.W. If you remember caring ---

6 A. Yes.

7 Q. --- for that resident on November 6th.

8 A. Yes.

9 Q. Okay. And upon arriving and checking on, on that  
10 particular resident, do you recall if there was a  
11 Foley Catheter in place?

12 A. No.

13 Q. Did you replace the Foley Catheter?

14 A. Yes. I replaced it.

15 Q. If you can look at that Exhibit on page 8, it's the  
16 red numbers on the top of the right. Look at the  
17 page.

18 A. Yes.

19 Q. There's one entry that, if you will, two entries  
20 that appear there on page 8. Did you make those  
21 entries?

22 A. Yes, I did.

23 Q. And per those nurse notes, at approximately what  
24 time did you replace the catheter?

25 A. 10:20 a.m.

1 Q. On November 6th?

2 A. On November the 6th.

3 Q. Okay. And where did you obtain the replacement  
4 catheter?

5 A. Well, we have a cabinet there in the garage. I, I  
6 -- apparently I got it from there.

7 Q. Okay. And do you know Ms., Ms. Darleen Wolf?

8 A. No, I do not.

9 Q. Did you see Ms. Wolf at the facility on that day?

10 A. Well, I'm sure I did if I relieved her.

11 Q. And you said you worked what shift that day?

12 A. Eight a to four p.

13 Q. Okay. But just looking at Ms. Wolf here today, do  
14 you recall?

15 A. No.

16 Q. You don't recall her?

17 A. No.

18 Q. Okay. Did you report to anyone that the catheter  
19 had not been replaced prior to your arrival?

20 A. I, I replaced it. That's all I can recall.

21 Q. Okay. Aside from, from your testimony, what you're  
22 saying that on November 6th around ten a.m., you  
23 replaced a catheter. It was not in place at that  
24 time. Aside from that testimony, do you have any  
25 other knowledge or any other information pertaining

1 to Ms. Wolf or this matter regarding this resident?

2 A. No, I don't.

3 Q. Okay. I don't have any further questions. Please  
4 answer any that Ms. Wolf may have or the Panel.

5 MS. WOLF: I don't have any questions.

6 MS. ANDINO: No questions?

7 EXAMINATION OF MS. MILLS BY THE BOARD:

8 MS. SCAGLIONE: Ms. Miller, Ms. Mills, correct?

9 A. Yes.

10 MS. SCAGLIONE: Mills. When you received report at  
11 seven or eight a.m. on the morning of November  
12 6th, the conversation about Ms. M.W.'s Foley  
13 Catheter between you and the nurse, nurse that  
14 was going home from night shift was?

15 A. I don't recall.

16 MS. SIEGFRIED: How did you know the patient didn't  
17 have a Foley?

18 A. I, I really don't recall. I, you know, I go in and  
19 I check my patients and -- because I -- apparently  
20 I didn't replace it until 10:20.

21 MS. GREEN: Did she replace one or put in a new  
22 one?

23 MS. SCAGLIONE: She put a new one -- you put a new  
24 Foley Catheter in?

25 A. Yes.

1 MS. SCAGLIONE: And you, and you, and the new Foley  
2 Catheter was in the cabinet in the garage ---

3 A. Yes.

4 MS. SCAGLIONE: --- where you keep all the  
5 supplies?

6 A. As far as -- I'm not sure. I can't honestly say.

7 MS. SCAGLIONE: You can't say where you got the  
8 Foley Catheter ---

9 A. No.

10 MS. SCAGLIONE: --- replacement from? Okay.

11 MS. GREEN: Did, did she replace or did she just  
12 put in a new one? That's my question.

13 A. I'm sorry.

14 MS. GREEN: Did you replace or did you put in a  
15 new? Just put in one? Was there one when,  
16 when you went in?

17 A. I put in a new one. I ---

18 MS. GREEN: You didn't take any one out? What I'm  
19 saying is did you replace or did you just put  
20 in one?

21 A. I didn't remove one if that's what you're saying.

22 MS. GREEN: So you just put in one?

23 A. Yes.

24 MS. SIEGFRIED: And you don't recall where you got  
25 the Foley?

1 A. We have -- no, I don't.

2 MS. SIEGFRIED: Have you ever not been able to get  
3 supplies? If you needed a Foley, have you  
4 ever had a, a, a time that there wasn't one  
5 available?

6 A. I, I don't recall.

7 MS. SIEGFRIED: Do you know the procedure if the  
8 supply isn't there, as to what you should be  
9 doing?

10 A. I know what I would do.

11 MS. SIEGFRIED: Do you know the procedure of the  
12 facility?

13 A. No, I don't know.

14 MS. BURGESS: Madam Chair, may I ask some  
15 questions?

16 MS. SCAGLIONE: Yes. Go ahead, Stephanie.

17 MS. BURGESS: Okay. So I just wanted to clarify.  
18 You did -- to your memory, she didn't have a  
19 Foley in and you went in there and put in a  
20 new one?

21 A. Yes.

22 MS. BURGESS: Okay. And you don't know where you  
23 obtained it, whether it was the supply closet  
24 in the garage or somebody delivered it?

25 A. Somebody may have delivered it. I ---

1 MS. BURGESS: But you ---

2 A. --- you know, I just don't, I don't recall.

3 MS. BURGESS: And your policies and procedures,  
4 back to Ms. Siegfried's question regarding the  
5 facility and incidents that occur and that you  
6 may have to obtain replacement equipment or  
7 notify somebody of an incident, is there a  
8 policy, for example, if the patient were to  
9 pull out a PEG or a Foley and there wasn't one  
10 in the supply cabinet, what is the procedure  
11 for you to obtain one?

12 A. I'm not sure.

13 MS. BURGESS: Okay. And you're employed by the  
14 facility or the agency at that time?

15 A. Facility.

16 MS. BURGESS: Okay. All right. Thanks. That's  
17 all my questions.

18 MS. ANDINO: Okay. No further questions. You can  
19 step out. And at this time the State rests.

20 MS. SCAGLIONE: Ms. Wolf, the State has presented  
21 its case and rests at the time. Would you  
22 like to present your case?

23 MS. WOLF: Yes, ma'am.

24 MS. SCAGLIONE: Okay. Go ahead, take the witness  
25 chair.

1 Whereupon,

2 Darleen Wolf is duly sworn and cautioned to speak  
3 the truth, the whole truth, and nothing but  
4 the truth.

5 STATEMENT BY THE RESPONDENT

6 MS. WOLF: My name is Darleen Wolf. I've been a  
7 nurse for 21 years. I'm an Army-trained  
8 nurse. The night that I worked with consumer  
9 M.W., I went in to do some incontinent care  
10 with the technician. I normally work with  
11 them and work with each individual patient  
12 when I work. I noticed that her bulb to her  
13 Foley Catheter was broken, and I went ahead  
14 and removed -- it had already slid out of her  
15 urethra. So I went ahead and removed it and  
16 bagged it and all. At that time, I did know  
17 that there was a supply cabinet in the garage  
18 with her equipment in it. And so I have a key  
19 on that key ring for the lock to that cabinet.  
20 Myself and the mental health specialist I was  
21 working with, her name was Mary, the first  
22 name was Mary -- at the time we went out to  
23 the garage and I literally crawled from shelf  
24 to shelf looking for a replacement Foley  
25 Catheter that particular evening. It was

1 11:30 at night. I -- when I finished with  
2 that I went in -- I had given, been given  
3 report earlier that day that Ms. M.W. was  
4 going under Hospice care. And I didn't --  
5 wasn't aware that there was any particular  
6 procedure to follow for the Wilson Home to  
7 obtain equipment. The last I had known when a  
8 consumer becomes Hospice care -- normally I'm  
9 familiar with contacting Hospice for all of  
10 their supplies and their needs and letting  
11 them know what's going on so that their --  
12 because they become somewhat of a primary care  
13 to the, the patients. I did not call Susan,  
14 who I believe was the head nurse, in the head  
15 nurse role at that time because of, I didn't  
16 feel that there was an emergency situation  
17 that required me to notify anybody for the  
18 resident at that particular time. I took my  
19 nursing judgement and I did what I thought I  
20 should do at the moment until I could get  
21 things stabilized with her. And then I went  
22 searching for the equipment that I would need.  
23 I could not send her to the emergency room to  
24 have the replacement catheter because the lift  
25 on the van was broken. I don't, I -- at that

1 time I know that there has always been,  
2 everywhere I've worked -- I've done agency  
3 nursing since 1994 darn near all over the  
4 United States and abroad, and I always  
5 remembered the lectures about money, money,  
6 money. And I know how much an ambulance  
7 visits cost to get her from the Wilson Home to  
8 Richland Northeast, I believe is where I'd be  
9 sending her. Also, I keep in mind with my --  
10 with all of my patients and have kept in mind  
11 that I try to do what's best for them. And  
12 when I went into Ms. M.W.'s room after I had  
13 gotten her vital signs on my own, she was on  
14 antibiotics for a present UTI already. Her  
15 temperature did not indicate that she was in  
16 any kind of danger of, life-threatening danger  
17 to me. And I took it that after 21 years of  
18 nursing that I, I was in a position that I  
19 think I can make that, that call. So I didn't  
20 feel she was in critical condition that she  
21 needed to go by EMS to have a Foley Catheter  
22 replaced. In my training I, I'm aware that  
23 it's an eight-hour window. If they do not  
24 void within eight hours, then we have an  
25 emergency situation. We go to the next step.

1 I don't know what the particular policies of  
2 Wilson's or the Department of Mental Health's  
3 protocols are, but I have worked with M.W. for  
4 a number of years. I worked with her before  
5 she came under Fairfield. I worked with her  
6 when she was with Babcock. So I have worked  
7 with the Department of Mental Health for a  
8 number of years, and I have worked with M.W.  
9 for a number of years. So I knew that patient  
10 inside and out. And as I said, myself and the  
11 mental health specialist that was with me that  
12 evening, we went out to the garage. We  
13 searched high and low everywhere. When the  
14 oncoming nurse came in, which was Linda Prater  
15 -- in fact I have my time slip from 2007 that  
16 she signed off on. When Linda came in, I said  
17 to Linda, I said, Her Foley Catheter is out.  
18 I have looked everywhere. If you give me a  
19 minute I'm going to run to the other houses,  
20 there's two more houses to go to. No one else  
21 in any of the other houses -- and M.W. was the  
22 only one in that particular house at that time  
23 that had a Foley Catheter. I went to all the  
24 other houses, went through all the areas that  
25 I could think of, all the supply cabinets

1 looking for another replacement catheter. I'm  
2 not an incompetent nurse. I'm not the best  
3 nurse, but I'm a damn good nurse. And I  
4 wouldn't leave my patient just lay like that.  
5 I wouldn't have been there until one o'clock  
6 in the morning trying to figure out what we  
7 were going to do so that we could get a  
8 replacement catheter. I asked Ms. Prater if  
9 she needed me to I'd be willing to run to the  
10 hospital to get a catheter and I'll bring it  
11 back and stick it in. That's how  
12 uncomfortable I felt leaving somebody else  
13 with, with something that I know I wanted to  
14 do myself and I needed to do that. So this  
15 isn't something that has, has not plagued me  
16 from that night. I have lost my marriage over  
17 this. I have gone on medicine because of  
18 this. I have done my job and there's nothing  
19 I would've done different given the  
20 opportunity to do it again. And that's all I  
21 need to say. I did what I thought was, was  
22 right. There were no policies, no procedure  
23 books. That was one of the things when I  
24 worked with Babcock and they went under  
25 Fairfield County control, was the one thing I

1 always said to them, you know, it's hard  
2 coming in to any place, and if I had something  
3 to go to to reference I'd, then I would know  
4 what to do. But I think that, in this  
5 particular case, M.W. was a very special case.  
6 She was an 80-something year old woman who was  
7 tired. And we did the best we could do to  
8 take care of her. It was a very difficult  
9 family to deal with. And I know that the  
10 doctor had a lot to deal with with that  
11 family. In this particular instance, if they  
12 red flagged that Foley Catheter not being  
13 replaced -- the one thing I did mention to Ms.  
14 Gwyn when she spoke to me, I said, Then you  
15 need to call every nurse that came in behind  
16 me and find out why the catheter wasn't  
17 replaced. I did my part. I offered to do  
18 more than my part. And I just at this point,  
19 I'm sitting here and I'm listening to  
20 testimony and I know I was right. And I guess  
21 that I wouldn't change a thing from that night  
22 that I did. And if they had the supplies, I  
23 would have made sure that that Foley Catheter  
24 was replaced. But it makes it difficult  
25 because after 21 years of nursing I now have

1 to question would I be quick to document the  
2 next time? That's the position I'm in right  
3 now. I, I have started an RN program. I  
4 stopped that. After all of this came out, I  
5 stopped doing anything that I tried to do. My  
6 goal is to go to medical school. I have taken  
7 all of my dreams and I have totally just  
8 washed them away because of this. So I, I  
9 don't know. I don't know what's going to come  
10 out of this, but I did what I was supposed to  
11 do. And there were other nurses that came  
12 behind me. And I know that Ms. Prater would  
13 have done the same thing. She would've  
14 replaced the catheter if there was one to  
15 replace. There was none available. And I  
16 could've made phone calls all night long, and  
17 at that time of night there was no one that  
18 was going to be able to bring us a Foley  
19 Catheter. Linda and I agreed that we'd use  
20 the eight-hour nursing window, and M.W. was  
21 voiding. She voided twice before I left.  
22 Because I documented that I did give her  
23 incontinent care. So if she was in danger, I  
24 would've been the first to put her in my own  
25 vehicle and take her, but the equipment was

1           faulty, the equipment wasn't there. And as I  
2           said, that lift van, the lift was broken.  
3           Because I talked to the tech and I said, Well,  
4           it's a cold night, but we can wrap her up and  
5           we can just run her over to ER real quick, get  
6           it done and go from there. And that's when  
7           she informed me the lift is broken. We can't  
8           even take anybody anywhere. So that was that.  
9           Those are the facts that happened that  
10          evening. That's all I have to say.

11   EXAMINATION OF MS. WOLF BY MS. ANDINO:

12          Q.    I just have a couple of questions just to follow up  
13                on your testimony.

14          A.    Yes, ma'am.

15          Q.    How long did you work there at Wilson I?

16          A.    For all total at Wilson I, II, and the other home -  
17                - there's three homes that go with that and that  
18                we work out of. All total, I've probably worked  
19                there between five and six years.

20          Q.    Always as a contract?

21          A.    As a contract nurse.

22          Q.    Okay.

23          A.    I started out when I was with, when they were  
24                Babcock.

25          Q.    Okay. And just going back, you stated you, you

1 searched for, for -- you knew where to look for the  
2 catheter?

3 A. Yes.

4 Q. Was it typical in those situations where you  
5 couldn't find a catheter or any other equipment  
6 that a resident needed, was it typical for you, or  
7 that you knew of, any other nurse to document that  
8 in their nursing notes that you looked but there  
9 wasn't one available?

10 A. I'm one of the few nurses, I'm strong on  
11 documentation. That's the way I learned. I, I  
12 learned that when you pick up a piece of paper,  
13 anybody else reading that should be able to have a  
14 vivid picture of what's going on. I'm just the  
15 type that documents because I need -- that's  
16 something to me that was important enough to  
17 document. Now, someone else doesn't document, I  
18 can't, I can't say what happened. I'm, I'm, you  
19 know, there's eight hours missing in there that  
20 wasn't documented on so.

21 Q. Uh-huh. So it would be important for you to  
22 document or, or in your experience, you would  
23 document that you went to, to look for a catheter  
24 but were unable to find, find one?

25 A. In this particular case, because I -- because there

1 are so many times that the equipment isn't  
2 available especially for the Special Needs and  
3 Disability, there was no use in me documenting that  
4 I couldn't find it. Some, some clients become  
5 catch 22s. You go in there and you do the best  
6 with what you have to work with. You have to  
7 improvise on many, on many occasions. For me,  
8 again if -- to me, to document that I went and I  
9 searched in the cabinet and I couldn't find the  
10 equipment, because I took and I take my patient  
11 care so personally, that to me is saying I'm  
12 pointing the finger at someone else. I, instead of  
13 what to me would have been a waste of time to  
14 document I couldn't find the equipment. What's  
15 new? I, I go to work there again and here we have  
16 another shift where I can't find what I need to  
17 work with. Let me try to do the next best thing  
18 and do the best I can do, do because the patient is  
19 my priority. That is the reason I didn't document  
20 it. It wasn't the first time I've not been able to  
21 have equipment to work with. And had I gone back  
22 to work there, it wouldn't be the last time I  
23 wouldn't have something to work with.

24 Q. And you said this patient was on Hospice, and is  
25 that correct to your knowledge?

1           A.    Well, my, my report that day -- when I got there  
2                    that afternoon, it was reported that she was now a  
3                    Hospice recipient.

4           Q.    And it's procedure for Hospice patients to -- for  
5                    Hospice to provide them with their equipment?

6           A.    I -- each client is different.

7           Q.    Uh-huh.

8           A.    I don't know what DDSN's protocol is when they deal  
9                    with Hospice. They don't have very many consumers  
10                   that are under Hospice care. My dealings with  
11                   Hospice is normally, when Hospice steps in, then  
12                   because of the, the way, the way the funding and  
13                   the billing is and all ---

14          Q.    Uh-huh.

15          A.    --- Hospice takes care of their equipment, takes  
16                   care of their medications and all. Each client is  
17                   different though. Some clients they handle that,  
18                   but we're made aware that it's coming through  
19                   facility or whoever's handling it though. All I  
20                   was given was the information that she was now  
21                   Hospice. Which to be a community care home, the  
22                   only thing that I knew of if she came up under  
23                   Hospice, that meant part of her funding was going  
24                   for Hospice and they would supply the equipment.  
25                   And that's why I made the phone call to Hospice and

1 not to Susan Chapman.

2 Q. Okay. So you called Hospice and informed them ---

3 A. I called Hospice and left a message for the Hospice  
4 nurse, because they are on call 24/7.

5 Q. Okay.

6 A. And I left a message for her to call me back. I  
7 just gave her a brief synopsis of what was going on  
8 and then if she could, just as soon as she got this  
9 message, she could just swing by and drop off a  
10 Foley Catheter, we'd go ahead and put another Foley  
11 Catheter in M.W.

12 Q. Okay. And you notice -- if you could turn to page  
13 7 of that Exhibit.

14 A. Yes.

15 Q. It's got your notes outlined there?

16 A. Uh-huh.

17 Q. Where you indicate where you apply the briefs until  
18 a replacement catheter arrives tomorrow per  
19 Hospice.

20 A. Yes.

21 Q. Your reasoning for indicating per Hospice?

22 A. Because I made the phone call to Hospice. I just  
23 didn't go back and document that I had, I had made  
24 the phone call to Hospice. I contacted Hospice.

25 Q. Okay. And because you contacted Hospice, is that

1           your reason for not contacting I guess the  
2           administrator or your supervisor to let them know  
3           that there was no catheter?

4           A.    Right.  At the time I was waiting to see if I could  
5           at least get Hospice to call me back to see what  
6           they wanted to do and then pull in Susan Chapman.  
7           At that time of night, it was going on midnight, it  
8           might've been after midnight going into.  Because  
9           it wasn't a life-threatening situation in my  
10          opinion and even in the night nurse's opinion when  
11          she came in, we didn't feel a need to call anyone  
12          other than, the -- the procedure that we followed  
13          we felt comfortable enough between the two of us  
14          that that would have been enough.  She had even  
15          told me, Linda Prater had told me, don't worry  
16          about it, Darleen.  You go ahead and go on home.  
17          If she doesn't void, I'll keep track of everything  
18          and then in the morning we'll just let, let them  
19          know.  Because Susan comes in fairly early in the  
20          morning.

21          Q.    Uh-huh.

22          A.    Susan's usually there between six and seven o'clock  
23          in the morning.  And because we were still in that  
24          eight-hour window, we would go ahead and just do  
25          the pad counts and the brief counts.

1 Q. And Susan is your, your supervisor?

2 A. Excuse me.

3 Q. Susan was your supervisor at the time?

4 A. Well, she was the head nurse supervisor over the  
5 Wilson I and II.

6 Q. Oh, okay.

7 A. And the, and the other house. Over those three  
8 houses there.

9 Q. Okay. Whenever -- like in this instance the cath,  
10 instance this catheter was unavailable, per your  
11 testimony it was unavailable, once you notify  
12 either Hospice or the head nurse, your supervisor,  
13 in your experience, typically how soon afterwards  
14 does a replacement come in?

15 A. That replacement typically isn't going to come in  
16 until the next day. You're lucky if you get it in  
17 the morning. Nine times out of ten you're not  
18 going to get it until probably towards the  
19 afternoon, later on in the morning, mid-morning,  
20 early afternoon because the supply trucks, the way  
21 they run, they, they're not going to run a delivery  
22 for one catheter.

23 Q. Uh-huh. And that's the same for Hospice or?

24 A. It's, it's -- the Hospice nurse can get something  
25 to you faster ---

1 Q. Uh-huh.

2 A. --- than the suppliers. To go through the  
3 suppliers, you're, you're going to have to wait  
4 until they're on their route. Which you'll  
5 probably get it within, you'll get within a 12-hour  
6 window normally. But that's why I called the  
7 Hospice nurse, because she could've brought it -- I  
8 mean, even if it was one, two, three o'clock in the  
9 morning, she could've got a Foley Catheter and  
10 shipped -- dropped it off. That's part of what she  
11 does. She's out and about anyway.

12 Q. Uh-huh.

13 A. So I guess to me the lesser of two evils, if I  
14 had've called Susan Chapman, still I would've had  
15 to make sure I faxed over an order to the supplier.

16 Q. Uh-huh.

17 A. Then we had to wait for them to get the equipment.  
18 They're not going to open up until the next  
19 morning. It was just, since she was Hospice, I  
20 figured that's what we worked with Hospice for.

21 Q. Okay.

22 A. If we need anything.

23 Q. Okay. I don't have any further questions.

24 EXAMINATION OF MS. WOLF BY THE BOARD:

25 MS. SCAGLIONE: Darleen ---

1 A. Yes, ma'am.

2 MS. SCAGLIONE: M.W. was, is, was, was terminally  
3 ill on Hospice and do not resuscitate?

4 A. She was a do not resuscitate. She just went on  
5 Hospice. She had been terminally ill for a number  
6 of years.

7 MS. SCAGLIONE: She was -- was she comfort care  
8 only? Or was she, in, in, in -- in this  
9 particular facility without a resident do not  
10 resuscitate order?

11 A. It's a comfort, it's a comfort measures only.  
12 Palliative care only. In her, in her case, I would  
13 say that more than likely for the past three to  
14 five years, if I had to call it, I would say  
15 palliative care for her. But there was a family  
16 that they just -- I pushed for Hospice for a long  
17 time for M.W. I pushed for Hospice because of the  
18 family, not because of M.W. Because I'm very, very  
19 close to a lot of Hospice. I, I think they're  
20 wonderful. I think a lot of people get the wrong  
21 idea about Hospice. I'm the type that would use  
22 Hospice to work for the family as opposed to a  
23 patient. The family needed that extra support.  
24 They needed, they needed that guidance. They were  
25 going to need that after care, not the patient so

1 much. When I saw that M.W. finally had gotten put  
2 on Hospice care, I actually was very elated  
3 because, like I said, I've worked with her for a  
4 number of years. I worked with her when she was at  
5 the Babcock Home in Lexington. Excuse me. And I  
6 don't care what anybody says, when you're a nurse  
7 and you have -- when you're a nurse and you want to  
8 be a nurse, that's what you do and nothing else  
9 matters except for taking care of those patients  
10 and those families and doing the right thing as a  
11 nurse. I don't need someone to be able to speak to  
12 me. I can look in their eyes. I can see how their  
13 body movements are. I can see their grimaces. I  
14 asked M.W. that night -- in fact, she had just come  
15 back from the hospital I believe three or four days  
16 prior. She was tired. And even for me to -- if  
17 the lift van, lift van had worked, I would've taken  
18 her, gotten her to the hospital for a Foley Cather.  
19 Even though in my heart she just kept looking at me  
20 and she just sort of would move a little bit. She  
21 was tired. She was tired of laying in cold beds  
22 and cold rooms and things going in and out and  
23 everything. So I asked her, M.W., do you want me  
24 to send you to the emergency room? Your catheter  
25 is out. I can send you. I never take for granted

1 anybody that is mentally delayed or anything else.  
2 People communicate, I don't care what anybody says.  
3 I have that much faith in the fact that God put  
4 human beings together perfectly. There is nothing  
5 wrong with us. And I still communicate with people  
6 regardless of what their shortcoming or whatever  
7 society thinks about them. She looked at me and  
8 she just had this look on her face like if you  
9 could just let me rest for just a little bit, give  
10 me a break here. And I, I even said to her -- the  
11 whole time I was telling her what I was doing. I  
12 said, We're going to do a pad count. If you're not  
13 voiding, then we have to send you, but let's just  
14 see how things go right now. Like I said, her  
15 vital signs were stable. She was on antibiotics  
16 already. She was not in a life-endangering  
17 situation that I could see. And I did the best  
18 that I could do. And my best that I would do the  
19 same thing given the opportunity to do it again.  
20 The only thing different, I probably would've made  
21 the call to Susan. But I didn't know I needed to  
22 make the call to Susan. In that nurses' room,  
23 there are papers everywhere. There is no protocol.  
24 There is nothing you can go to to really sit down,  
25 and to be honest with you, the amount of time that

1           it would take you to have to find things, you would  
2           have to be able to work just very quickly. You  
3           have to use your nursing judgement.

4           MS. SCAGLIONE: Okay. Darleen, I have two  
5           questions.

6           A. Yes, ma'am.

7           MS. SCAGLIONE: Do you know where the, where the  
8           day-shift nurse that was in here before you  
9           testified got her Foley Catheter the next  
10          morning?

11          A. No, ma'am. I do not.

12          MS. SCAGLIONE: Did you work the next evening?

13          A. No, ma'am. I, I, I did not. I believe my, my next  
14          witness will . . .

15          MS. SCAGLIONE: What's that?

16          A. My next witness will be able to explain to you. I,  
17          I believe that's when my agency got the call that I  
18          was not allowed to come back.

19          MS. SCAGLIONE: Okay. So that was your last shift  
20          there at this particular -- okay.

21          A. Yes, ma'am.

22          MS. SCAGLIONE: Okay. Darleen, what do you think  
23          should happen, happen in this circumstance  
24          here with, with this catheter incident?

25          A. To be honest with you, I'm not without fault. If,

1 if fault is going to be placed, then fine. I will  
2 take the blame for not replacing the catheter. But  
3 I had nothing to replace the catheter with. If I  
4 need to be reprimanded, then that's fine if the  
5 Board needs to do something. If something has to  
6 be done and somebody wants somebody to pay for what  
7 happened, I'd be willing to take the blame for all  
8 of it, even though I know that there was nothing  
9 humanly possible that I could do. There was  
10 nothing the nurse coming on after me could humanly  
11 possibly do. And then at 10:20 in the morning,  
12 still you have a third nurse involved. My biggest  
13 qualm was, if I'm going to be punished, I think  
14 that all of us need to be reprimanded somehow,  
15 somehow if it's going to happen, because it wasn't  
16 just the one person. It wasn't intentional I  
17 don't, I don't think by any means on any one of our  
18 parts.

19 MS. SCAGLIONE: What do you think could have  
20 prevented this, this? If you had to give  
21 us a recommendation here for the supply?

22 A. If I had to give you a recommend -- having worked  
23 with Special Needs and Disability for so long,  
24 there is a strong lack of communication. And it's  
25 difficult when you're a nurse. It's hard enough

1           when you're a nurse and you're on the staff, but  
2           it's more difficult when you're a nurse and you're  
3           coming from the outside in. You already have a  
4           black cloud over you. I think that whoever deals  
5           with supplies needs to do a better job of being  
6           sure the supplies are stocked. I think that a  
7           definite protocol book in writing needs to be put  
8           in place so that anybody, doesn't matter whether  
9           you're a nurse or not, can go in there and be able  
10          at least to tab through and find some information.  
11          You may not find everything. I, I'm aware of phone  
12          rosters that are years old that are still hanging  
13          in the offices. Like I said, a lot of, a lot of  
14          what you're required to do, especially with the  
15          Special Needs and Disabilities homes, is very time  
16          consuming. It's very frustrating because it takes  
17          away from patient care. I think that everybody  
18          needs to step up and take responsibility. And I  
19          think that that's probably one of the things that  
20          had occurred in this particular instance. I never  
21          heard anything from the facility. And if it's not  
22          their responsibility to contact me directly, then  
23          that's fine. But all nurses know nurses. We've  
24          all encountered each other someway, somehow, one  
25          time or another. And I think that it just needs to

1           be a little bit more organized in those particular  
2           community care homes. Because that's not the first  
3           one; there's a ton out there. I've worked in many  
4           of them. And unless you have one of the, a nurse  
5           that sort of has an OCD type of effect, you're not  
6           going to have a lot of organization. You just have  
7           to have somebody that's extremely organized or  
8           extremely OCD-ish. That's all.

9           MS. SCAGLIONE: Thank you. Excuse me a second. I  
10           need to ask her a question.

11       (Off the record discussion.)

12           MS. SCAGLIONE: Darleen, my last question is are  
13           you working somewhere now as a, as a licensed  
14           practical nurse?

15       A.    Very rarely.

16           MS. SCAGLIONE: Very rarely?

17       A.    I'm scared to work.

18           MS. SCAGLIONE: You're scared to work?

19       A.    Yeah. This is really, really -- it, it took a big  
20           toll on me. I'm scared to do much of anything.  
21           Right now the only thing I'm doing with the agency,  
22           I'm -- and I've asked to sort of just be in the, in  
23           the background a little bit more. Right now I'm,  
24           I'm supervising some pediatric home care cases. I  
25           go out and do the assessments on pediatric home

1 care cases or special needs.

2 MS. SCAGLIONE: Were you reprimanded at all by your  
3 agency? Given any punishment by your agency  
4 with this incident?

5 A. No, no. I ...

6 MS. SCAGLIONE: What was the agency you were  
7 working for by the way?

8 A. Statewide.

9 MS. SCAGLIONE: Statewide?

10 A. Statewide Nursing Solutions.

11 MS. SCAGLIONE: Okay.

12 A. Yes, ma'am. The -- she's here. The manager of my  
13 agency is here. When she called me and told me  
14 what was said to her from the nurse from the  
15 community care home, they're -- everybody is trying  
16 to find a reason to reprimand me. I've had  
17 numerous nurses that -- a couple of my friends that  
18 are nurses I've spoken with. I've just given them  
19 a point and case type scenario, you know, what if  
20 this happened? And I've had everybody saying pad  
21 count. If you don't have the equipment, that's  
22 what nurses do. We, we, we check voids. It's an  
23 eight-hour window, that's what we do. You have to  
24 use your nursing judgement. So it's very difficult  
25 to find anyone that is willing to reprimand me

1           because no one seems to think I did anything wrong.  
2           And I still -- I don't believe I did anything  
3           wrong. I did what I was supposed to do.

4           MS. SCAGLIONE: So Statewide, so the agency did  
5           nothing about the particular incident?

6           A. No. They asked me when are you going back to work?  
7           Let's go and get you back out there doing  
8           something, because you can't coop yourself up at  
9           home. You'll wither away because of this.

10          MS. SCAGLIONE: All right. Thank you, I'm done.  
11          Carole, anything?

12          MS. SCAGLIONE: Stephanie, anything?

13          MS. BURGESS: Yeah. Just a few questions, please  
14          ma'am.

15          A. Yes, ma'am.

16          MS. BURGESS: And I just -- this is all for  
17          clarification, most of it.

18          A. Yes, ma'am.

19          MS. BURGESS: When you came on shift, the Foley was  
20          there, right? But you said it had slipped  
21          out; is that correct?

22          A. When I came on shift -- normally the patient care  
23          technicians, they pulled back the covers. There's  
24          very rare instances where I'll pull back covers.  
25          It depends on who I'm working with. We don't

1 necessarily go in depth -- when they're doing  
2 incontinent, incontinent care, we expect those  
3 aides to be able to let us know if something  
4 doesn't look right and then we go ahead and do  
5 that. When you come on a shift, the first thing  
6 you have to do is get medications pulled and get  
7 the meds out. That is the priority. Everything  
8 else just sort of, you sort of get it when, as  
9 you're going along.

10 MS. BURGESS: So an aide told you?

11 A. Yes. The aide told me when she went in to do  
12 incontinent care that evening. And I asked her, I  
13 said, Well, was the Foley Catheter out or anything  
14 during the course of the evening.

15 MS. BURGESS: Do we know what time the aide told  
16 you?

17 A. Let's see. My note was at 11:30. She let me know  
18 -- in fact we searched high and low for about 30  
19 minutes in that particular house. So at about 11  
20 o'clock is when she told me. When she was doing  
21 her last rounds. I think the aides work seven to  
22 three, three to 11, 11 to seven, or however they --  
23 some of the aides come in on the odd hour there.

24 MS. BURGESS: So you went to check it?

25 A. Yes. I went in ---

1 MS. BURGESS: And then you discovered that the bulb  
2 was fractured?

3 A. Yes.

4 MS. BURGESS: And then y'all went to look for a new  
5 catheter?

6 A. Yes, ma'am.

7 MS. BURGESS: And you went to the garage and you  
8 said you searched high and low?

9 A. Yes, ma'am.

10 MS. BURGESS: Even in the other folks' ---

11 A. Yes, ma'am.

12 MS. BURGESS: --- cabinets or where they keep their  
13 supplies and there was nothing to be found; is  
14 that correct?

15 A. Yes, ma'am. I emptied the cabinets in fact. I  
16 pulled things out and was sitting things out of the  
17 cabinets. Yes, ma'am.

18 MS. BURGESS: And did anybody see you do that?

19 A. Yes. It was Mary, the technician ---

20 MS. BURGESS: Medical aide?

21 A. --- that was on. Yes, ma'am.

22 MS. BURGESS: And then you also said that you even  
23 went to the other two facilities?

24 A. Yes. The other two houses. Yes, ma'am.

25 MS. BURGESS: And that you did when the other nurse

1                   came on shift?

2           A.    Yes.

3           MS. BURGESS:   --- because you couldn't leave your -  
4                    --

5           A.    Yes, ma'am.

6           MS. BURGESS:   So do we have any witnesses at those  
7                    facilities who could testify or corroborate  
8                    your story that you did go over there and look  
9                    for supplies?  I mean, were there people over  
10                  there that saw you?

11          A.    Yes, ma'am.  The, the techs should've been there  
12                  when I came, when I came into those houses.  I  
13                  don't know if they knew what I was doing or ---

14          MS. BURGESS:   But they saw you there?

15          A.    They should've seen me.  Yes, ma'am.

16          MS. BURGESS:   Okay.  And in terms of the voiding on  
17                  your shift.

18          A.    Yes.

19          MS. BURGESS:   You noticed that she had 275 ccs in  
20                  her catheter.

21          A.    In her ---

22          MS. BURGESS:   So she didn't void on your shift --  
23                  just -- but it was in the catheter, correct?

24          A.    It, when I -- yes.  When I found the Foley Catheter  
25                  bulb was broken, there was 275 ccs of urine in the

1 bag.

2 MS. BURGESS: Was the, were the sheets wet?

3 A. No. Her sheets were not wet that I was aware of.

4 MS. BURGESS: Okay. So after you searched high and  
5 low, went to those other places, you said you  
6 called Hospice?

7 A. Yes, ma'am.

8 MS. BURGESS: And who did you speak to?

9 A. I don't know the name. I just left a message for  
10 the on-call Hospice nurse. I didn't even know who  
11 she was assigned to yet. I don't think they had a  
12 particular nurse.

13 MS. BURGESS: Did you leave a message for her to  
14 call you or him to call you or?

15 A. Yes, ma'am. I left a message for her to call me  
16 back and if she could in the morning I'd let her  
17 know about the Foley Catheter. If she could, first  
18 thing in the morning as soon as she got that  
19 message, if she could bring a Foley Catheter over  
20 for M.W.

21 MS. BURGESS: And was that phone call made from the  
22 facility?

23 A. That was made from the facility. Yes, ma'am.

24 MS. BURGESS: So is there a phone call record of  
25 that; do we know?

1 MS. ANDINO: Not to our knowledge.

2 MS. BURGESS: Okay. And then you said the policy  
3 or the procedure, whether it's written or  
4 unwritten, is that when y'all are -- don't  
5 have your supplies or, or you need something  
6 from a supplier, a vendor, you fax over the  
7 request?

8 A. From what I understand, and that's from working at  
9 all facilities. I would assume that they have the  
10 same type of protocol, but I'm not sure. The only  
11 thing that I would know is that there's got to be  
12 something somewhere that we need a number for a  
13 supplier, but again.

14 MS. BURGESS: And you had faxed them a request?  
15 Had you done that at the other facilities  
16 within this whatever?

17 A. Within the DDSN.

18 MS. BURGESS: Yeah.

19 A. No. I've never had to. I've never had to go and  
20 look for supplies like that before.

21 MS. BURGESS: Okay. And when you faxed over -- no.  
22 You didn't fax over; you called Hospice.  
23 Never mind, excuse me.

24 A. Yes, ma'am.

25 MS. BURGESS: And you said there is no policy or

1 procedure manual on site that helps y'all or  
2 guides y'all to take care of these kinds of  
3 incidents; is that correct?

4 A. Not that I'm aware of. And if there is one, there  
5 is an office that normally I believe the  
6 administrator is in. They have different people in  
7 different roles in those houses. And supposedly  
8 nursing, we're supposed to like do, do our own  
9 thing. But I know there's a lot of times I'll see  
10 in the other offices there are a lot of manuals and  
11 all, but not in the nursing office. If it's in  
12 there, there's no way that there's an easy access  
13 to it that you can see that it's out.

14 MS. BURGESS: And your own agency did not supply  
15 you with any procedure manual for you to  
16 review before you went and worked in these  
17 facilities, or did they?

18 A. Not that particular day. No, ma'am.

19 MS. BURGESS: No. I don't mean that day, I mean  
20 overall.

21 A. Overall, yes. I have, I've had a, a policy manual  
22 before. That was under Babcock, whenever they were  
23 Babcock.

24 MS. BURGESS: But I'm talking about for this  
25 facility. When your agency sent you out, did

1                   they supply you with a policy and a procedure  
2                   manual for whoever governs these facilities?

3                   I don't know who it is, but.

4           A.    No, not -- no.  They don't, they don't supply you.  
5                   Initially when you go to work for that particular  
6                   client, you have the opportunity to sit down with  
7                   whatever manual that the, that the client has  
8                   supplied to the agency.

9           MS. BURGESS:  Right.  That's what I'm asking you.

10          A.    No.  Fairfield, as far as I know, there wasn't  
11                   anything from Fairfield County.

12          MS. BURGESS:  Okay.  And then two more questions.

13          A.    Yes, that's fine.

14          MS. BURGESS:  And you said you recorded her vital  
15                   signs, but I don't see them in your notes.  So  
16                   is there a temp sheet somewhere?

17          A.    Hold on a second.

18          MS. BURGESS:  Unless I'm just dumb and I can't see  
19                   it.  I see where you put TMP every few hours  
20                   and PRN.

21          A.    Turn and position.

22          MS. BURGESS:  I guess that means temp and pulse.

23          A.    No.  That's turn and position.  Hold on a second.

24          MS. BURGESS:  Sorry.

25          A.    No.  That's okay.

1 MS. BURGESS: Well, I don't see a vital sign  
2 record.

3 A. No. There should've been a, there should've been a  
4 flow sheet with vital signs on it. And that would  
5 be part of the patient care.

6 MS. BURGESS: So there is one?

7 A. There should be. Yes. There should be a flow  
8 sheet.

9 MS. BURGESS: And the pad count, where is that?

10 A. The pad count?

11 MS. BURGESS: Uh-huh.

12 A. I didn't do -- I didn't write the pad count on  
13 here. At this time, the nurse -- by the time the  
14 second nurse was coming in, she had voided and I  
15 reported that to, to the nurse.

16 MS. BURGESS: So the patient did void after you  
17 took the Foley out on your shift?

18 A. Yes, she did. In fact, I -- the last entry I have  
19 on here is when I was coming to, to the end of this  
20 incontinent care was rendered. And that's when I  
21 changed her myself.

22 MS. BURGESS: I don't see that.

23 MS. SCAGLIONE: It's on the last line.

24 A. At the very, very last line. I changed ---

25 MS. BURGESS: I see it. Okay. I see it.

1           A.     Right.  That's, that -- I, I changed her myself  
2                   that time.  And then before I was leaving, the  
3                   personal care tech had let me know that she had  
4                   voided again.

5           MS. BURGESS:  All right.  Thanks, that's all my  
6                   questions.

7           MS. SCAGLIONE:  Any other questions?

8           MS. BURGESS:  No, ma'am.

9           MS. ANDINO:  Are there any witnesses that you want  
10                   to call to testify on your behalf?

11          A.     Tammy Walker, please.  Thank you.

12   Whereupon,

13                   Tammy Walker is duly sworn and cautioned to speak  
14                   the truth, the whole truth, and nothing but  
15                   the truth.

16           COURT REPORTER:  Will you please state your full  
17                   name for the record?

18           WITNESS:  Tammy Walker.

19           COURT REPORTER:  Thank you.

20           MS. ANDINO:  Since it's her witness, she can ask  
21                   any questions.

22           MS. SCAGLIONE:  Okay.  Ms. Wolf?

23           MS. WOLF:  Yes, ma'am.

24           MS. SCAGLIONE:  Would you like to introduce your  
25                   witness to us?

1 MS. WOLF: Yes. This is Tammy Walker. She is the  
2 manager of the Statewide Nursing Solutions,  
3 and she's my boss.

4 MS. SCAGLIONE: Okay.

5 EXAMINATION OF MS. WALKER BY MS. WOLF:

6 Q. Tammy, you had called me after you'd received a  
7 phone call from the Wilson II home?

8 A. Yes.

9 Q. And can you please explain to me what was said in  
10 that phone call and who you spoke to?

11 A. Yes. I talked to Susan, and I can't remember her  
12 last name. But she just called and said that there  
13 was a resident that had a Foley Catheter that was  
14 broken and that wanted to know if I could get in  
15 touch with you to find out why the Foley Catheter  
16 was not replaced. And that's when I called you and  
17 -- do, do I need to explain?

18 Q. Did she say anything else on that phone call as to  
19 my character or anything like that, or my work  
20 performance or anything at all?

21 MS. ANDINO: Before you answer, I have to object  
22 that that's hearsay.

23 Q. Oh, I'm sorry.

24 MS. ANDINO: Just -- the witness can't testify to  
25 anything that someone else said if they're not

1                   here.

2           Q.     Oh, okay.

3           MS. ANDINO:   So you can frame your question just  
4                   knowledge that she has without having someone,  
5                   you know, stating what someone else said.

6           Q.     Okay.   And when I spoke to you, I explained to you  
7                   that there wasn't another Foley Catheter for me to  
8                   replace; is that correct?

9           A.     Right.

10          Q.     Okay.   Did you know at that time that I would,  
11                 would be -- whether I'd be allowed to work at the  
12                 facility again or whether I would not be able to  
13                 work at the facility?   Was there anything said to  
14                 you about whether I could come back to the facility  
15                 or what had happened?

16          A.     Susan just said to me that they were not going to  
17                 report it to the State Board.   That, you know, they  
18                 were just choosing to not have you back there to  
19                 work, that she had worked with you for many, many  
20                 years, but that -- and that you'd always done a  
21                 super job, but it was coming from someone else that  
22                 you couldn't come back.

23          Q.     Okay.   That's pretty much all I have ask.

24          MS. ANDINO:   I don't have any questions.   Do you  
25                 guys have any questions?

1 EXAMINATION OF MS. WALKER BY THE BOARD:

2 MS. SIEGFRIED: I only have one. What was Darleen  
3 Wolf's work record?

4 A. With us?

5 MS. SIEGFRIED: Uh-huh.

6 A. Has always been super. I think she's gotten in  
7 trouble more times for being a stickler for the  
8 rules; never for not finishing something or not  
9 doing something properly. There's been two  
10 occasions that I remember quite distinctly to where  
11 they didn't want her back because, when she was  
12 questioned about doing something, she was like, No,  
13 that's not what we're supposed to do. And my  
14 license says that I'm supposed to do this, this,  
15 and this. And that has always been -- we've always  
16 been very careful where we place Darleen because of  
17 her strong, you know, ethics and personality.  
18 Because she is -- she has always been particular.

19 MS. BURGESS: I have one Madam Chair.

20 MS. SCAGLIONE: Okay.

21 MS. BURGESS: One of the witnesses testified that  
22 when they employ agency nurses they send  
23 policies and procedures to the contracting  
24 agency and that it -- that contracting agency  
25 should review those policies with that nurse

1                   that you're sending out. Did y'all get such a  
2                   copy?

3           A.    Huh-uh. Can I explain that?

4           MS. BURGESS: You sure can.

5           A.    When -- we used to do business with Wilson I and II  
6           many years ago, and I asked -- when I called them  
7           back -- we hadn't done business in years with them.  
8           And when we went this particular time, we, only a  
9           couple of nurses went for just a little while. But  
10          I offered to them for myself to come be oriented to  
11          their rules and regulations, then provide me with  
12          the training material so that we could go over it  
13          with everyone that could come out in case they ever  
14          did get in a bind and didn't have time for them to  
15          attend classes or whatever. And they said their  
16          new rule and regulation was that the nurses and the  
17          techs were to come to a class out there, and that  
18          they were actually scheduling classes and that they  
19          would get them into the classes. But they did not  
20          provide me with that information for them to review  
21          this time as they had done many years ago.

22          MS. BURGESS: So they didn't provide you anything?

23          A.    Huh-uh.

24          MS. BURGESS: To share with the nurses on, you  
25          know, the particulars of that, of that

1 facility? Policies, procedures, whatever?  
2 And they told you that they would provide her  
3 an orientation?

4 A. Yes.

5 MS. BURGESS: Okay. Thank you. That's all I got.

6 EXAMINATION OF MS. WALKER BY MS. ANDINO:

7 Q. I actually have a question that I want to follow up  
8 on just for clarification. Have you always been  
9 Statewide Nursing Services or were you guys under  
10 another name?

11 A. I used to work for two other agencies, but  
12 Statewide Nursing is, you know, its own company. I  
13 used to work for Palmetto Referral Services and  
14 Florence Nursing Services years ago.

15 Q. So you worked for -- when you say you worked for  
16 Florence Nursing Services, was that your agency or?

17 A. Huh-uh. I was a manager in their Florence office.

18 Q. And you're manager at the Statewide Nursing?

19 A. I am.

20 Q. Okay. Okay. Thank you.

21 A. You're welcome.

22 MS. GREEN: Was it Statewide Nursing Solutions or  
23 Statewide Nursing Services? Which?

24 A. Solutions.

25 MS. GREEN: Solutions. That's what I thought.

1 MS. ANDINO: I don't have any further questions.

2 MS. SCAGLIONE: Anyone else?

3 MS. BURGESS: No, ma'am. I'm good. Thank you so  
4 much.

5 MS. ANDINO: Yeah. We're not -- we haven't, we  
6 haven't finished. You stay in here. We have  
7 to close, close the hearing. The State waives  
8 its closing unless the Respondent wants to  
9 make a closing statement.

10 MS. SCAGLIONE: Right. And she -- do you want to  
11 make a closing statement, Darleen?

12 MS. WOLF: No, ma'am. Thank you. Thank you for  
13 hearing what I had to say.

14 MS. GREEN: Madam Chairman, do you want to go into  
15 executive session?

16 MS. SCAGLIONE: Yes. Yes.

17 MS. BURGESS: Do I make a motion to do that?

18 MS. SCAGLIONE: We'd like to go into executive  
19 session.

20 (Executive session from 12:13 p.m. to 12:20 p.m.)

21 MS. SCAGLIONE: Ms. Wolf, the basic recommendation  
22 is to dismiss this case.

23 MS. WOLF: Thank you. Thank you.

24 MS. SCAGLIONE: And a, a, a report will be  
25 presented to the full Board.

1 MS. WOLF: Thank you so much.

2 MS. SCAGLIONE: Nothing further. Thank you.

3 (Whereupon, at 12:21 p.m., the  
4 proceeding in the above-entitled  
5 matter was concluded.)

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1 STATE OF SOUTH CAROLINA )  
 2 ) CERTIFICATE  
 3 COUNTY OF LEXINGTON )  
 4

5 Be it known that I, Jennifer S. Angooraj Professional  
 6 Verbatim Court Reporter and Notary Public in and for the  
 7 State of South Carolina, took the foregoing hearing at 10:18  
 8 a.m. on Tuesday, September 15, 2009;

9 That the foregoing 101 pages constitute a true and  
 10 accurate transcription of the proceedings and all testimony  
 11 given at that time to the best of my skill and ability;

12 I further certify that I am not counsel or kin to any of  
 13 the parties to this cause of action, nor am I interested in  
 14 any manner of its outcome.

15 In witness whereof, I have hereunto set my hand and seal  
 16 this 24th day of September, 2009.

17 \_\_\_\_\_  
 18 Jennifer S. Angooraj  
 19 Notary Public for South Carolina  
 20 My commission expires January 4, 2010

21  
 22  
 23 This transcript may contain quoted material. Such material  
 24 is reproduced as read or quoted by the speaker.

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**DARLEEN WOLF, L.P.N.**

License No. LPN.28694

OIE # 2007-475

Respondent.

**WAIVER OF ATTORNEY**

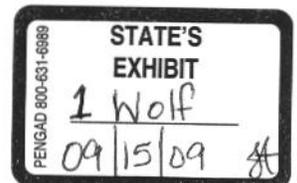
I, Wolf, Darleen, do hereby waive my right to have an attorney  
(Print Name)

represent me before the State Board of Nursing on this **15<sup>th</sup> day of September of 2009.**

I am freely, voluntarily, and knowingly waiving my right to an attorney in this proceeding.

Darleen Wolf  
Respondent

[Signature]  
Witness



SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING

IN THE MATTER OF:

DARLEEN WOLF, L.P.N.  
License No. LPN.28694

OIE # 2007-475

Respondent.

NOTICE OF HEARING

To: Ms. Darleen Wolf, Respondent

PLEASE TAKE NOTICE THAT:

1. The hearing in the above-captioned matter has been scheduled for **September 15, 2009, at 10:00 a.m.\*** in **Room 202-02**, Kingstree Building, 110 Centerview Drive, Columbia, South Carolina.

**IF YOU DO NOT APPEAR AT THE HEARING, THE STATE BOARD OF NURSING WILL CONDUCT THE HEARING IN YOUR ABSENCE. AFTER CONDUCTING THE HEARING, THE BOARD MAY TAKE SUCH DISCIPLINARY ACTION AS IS APPROPRIATE FOR THE CHARGES DESCRIBED, AND AS IS ALLOWED BY LAW.**

2. Hearings are held in accordance with the South Carolina Administrative Procedures Act, S.C. Code Ann. § 1-23-310, *et seq.*, which describes your procedural rights, including, but not limited to, the right to respond and present evidence and testimony on all issues involved. You may have legal counsel to represent you in this matter, so as to more fully understand, protect, and assert your legal rights.

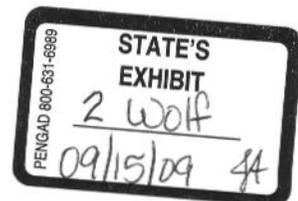
SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
THE STATE BOARD OF NURSING

  
\_\_\_\_\_  
Jocelyn T. Andino  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

Columbia, South Carolina

09 / 08 / 09

\*Hearing times are subject to change



**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**DARLEEN WOLF, L.P.N.**  
License No. LPN.28694

OIE # 2007-475

Respondent.

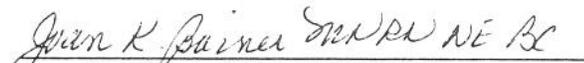
**NOTICE**

TO THE ABOVE-NAMED RESPONDENT:

**YOU ARE HEREBY NOTIFIED AND REQUIRED** to answer the Formal Complaint in this action, a copy of which is hereby served upon you; to file your Answer to said Formal Complaint with the Board of Nursing at Post Office Box 12367, Columbia, SC 29211-2367; and to serve a copy of your Answer to said Formal Complaint on the subscribed Attorney at Post Office Box 11329, Columbia, SC 29211-1329, within **thirty (30) days** after the service hereof, exclusive of the date of such service.

Failure to timely file your Answer in this matter may result in the allegations being **admitted and a default judgment** being rendered against you.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
BOARD OF NURSING**

  
\_\_\_\_\_  
Joan K. Bainer, MN, RN, NE BC  
Board Administrator

June 9, 2009.

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING**

**IN THE MATTER OF:**

**DARLEEN WOLF, L.P.N.**  
License No. LPN.28694

OIE # 2007-475

Respondent.

**FORMAL COMPLAINT**

The South Carolina Board of Nursing, hereinafter referred to as the Board, alleges that:

I.

Respondent is a Licensed Practical Nurse duly licensed by the Board to practice in South Carolina and was so licensed at all times relevant to the matters asserted in this case. This Board has jurisdiction over Respondent and the subject matter of this action.

II.

The Board received an initial complaint and notification, as required by law, and investigated Respondent's conduct.

III.

Upon information and belief, Respondent has engaged in certain conduct that violates provisions of the South Carolina Nurse Practice Act (S.C. Code Ann. § 40-33-10, *et seq.* (1976, as amended)) and the Rules and Regulations of the Board, including the commission of the following acts:

- A. That on or about November 5, 2007, while employed at Wilson I (Medically Fragile) CTH II in Blythewood, managed by Fairfield County Disabilities & Special Needs Board, Respondent failed to replace a broken Foley Catheter on patient M.W. Respondent worked the 4:00 PM to 12:00 AM shift and was informed of the location of a replacement, but failed to retrieve or replace the Foley Catheter. The Foley Catheter was not replaced until approximately 10 AM on November 6, 2007.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. § 40-33-110(A)(3) (Supp. 2008), in the following particulars:

- A. Respondent has violated S.C. Code Ann. § 40-33-110(A)(3) (Supp. 2008), in that she has willfully or repeatedly followed a course of conduct that, by reasonable

professional or ethical standards, renders the licensee incompetent to assume, perform, or be entrusted with the duties, responsibilities, or trusts which normally devolve upon a licensed nurse, as evidenced by Respondent's failure to replace a broken Foley Catheter on a patient under her care and supervision.

V.

**PURSUANT** to S.C. Code Ann. § 40-33-110 (1976, as amended), the Board has the authority to order the revocation or suspension of a license to practice nursing, publicly or privately reprimand the licensee, or take other reasonable action short of revocation or suspension, such as requiring the licensee to undertake additional professional training subject to the direction and supervision of the Board, or imposing restraints upon the practice of the licensee as circumstances warrant until the licensee demonstrates to the Board adequate professional competence. Additionally, the Board may require the licensee to pay a civil penalty of up to two thousand dollars (\$2,000.00) to the Board for each violation, up to a total of ten thousand dollars (\$10,000.00).

**THEREFORE**, the Board will consider these allegations and make such disposition as may be appropriate. You may respond and present evidence and argument on all issues involved. You may appear alone or with legal counsel.

**SOUTH CAROLINA BOARD OF NURSING**

06 / 08 / 09  
Date

BY: \_\_\_\_\_



JOCELYN T. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
Post Office Box 11329  
Columbia, South Carolina 29211-1329

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

In the Matter of:

**DARLENE WOLF, L.P.N.**  
License No. 28694

OIE #2007-475

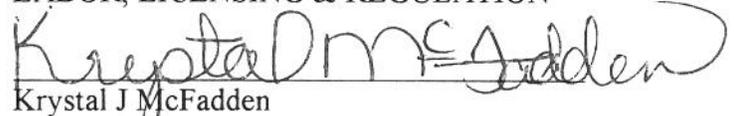
Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice, Formal Complaint, and Notice of Hearing** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Ms. Darlene Wolf  
7725 Sunview Circle  
Columbia, SC 29209-3036

SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING & REGULATION



Krystal J McFadden  
Administrative Assistant  
LLR-Office of General Counsel  
Post Office Box 11329  
Columbia SC 29211 1329

June 9, 2009.

7006 2150 0002 3531 1675

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)  
For delivery information visit our website at www.usps.com

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

6/9/09  
Postmark Here

Sent to: **Ms. Darleen Wolf**

Street or PO: [Redacted]

City, State, ZIP+4: [Redacted]

PS Form 3800, August 2005 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**Ms. Darleen Wolf**

[Redacted Address]

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*x Lyanna Wolf*

B. Received by (Printed Name) *Lyanna Wolf*

C. Date of Delivery *6/11/09*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

*North*  
**NOV 11 2009**  
**U.S. MAIL**  
**2007-475**

3. Service Selected:  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

7006 2150 0002 3531 1675

FCDSNB  
PHYSICIAN ORDER FORM

Consumer Mable White

DATE	PHYSICIAN ORDERS	REASON	STAFF SIGNATURE
5 Oct 07	Foley Cath care Q day Δ foley cath Q month	Infection prevention	Andrew H... 5 Oct 07 10:00 AM

PHYSICIAN SIGNATURE [Signature]

DATE 10/5/07

REVISED 3/29/05  
FORM 105

PENGAD 800-631-6985

STATE'S  
EXHIBIT  
3 wolf  
09/15/09 #A

FCDSNB  
PHYSICIAN ORDER FORM

Consumer Mable White

DATE	PHYSICIAN ORDERS	REASON	STAFF SIGNATURE
10-31-07	<p>Δ nebulizer weekly on Wednesdays</p> <p>Δ Suction canisters 1st of q months.</p> <p>Δ Catheter tip syringes daily @ 8AM</p>		

PHYSICIAN SIGNATURE [Signature]

DATE 11/14/07

REVISED 3/29/05  
FORM 105



WHITE LABEL R  
A# E00112138615 U#Z000049371  
11/02/07 F 84 11/24/22  
Hayes, Michael T

<input checked="" type="checkbox"/> Admit As Inpatient	Indicate Medical Reason:
<input type="checkbox"/> Admit As Outpatient Observation	Indicate Medical Reason:
<input type="checkbox"/> Outpatient Procedure / Services	Indicate Medical Reason:

**Physician's Orders**

Date: 11/2/07	Time: 1:20 PM	AM	Profiled by:	Filled by:	Checked by:
---------------	---------------	----	--------------	------------	-------------

① D/C Back to Home facility  
 ② PT IS DNR (per Dr. Negash discussion)  
 ③ Health care Coordinator (Sister) (Madge Myatt) to call Hospice Agency (7650) tomorrow for hospice care

Physician Signature: *Dr. Negash* | *R. Negash* | Beeper #:

Date:	Time:	AM	Profiled by:	Filled by:	Checked by:
		PM			

Physician Signature: | Beeper #:

**12 HOUR CHART CHECKS ARE REQUIRED EACH DAY**

**Orders:** Another brand of a generically equivalent product identical in dosage form and content of active ingredient may be administered unless requested

**Automatic stop order** schedule of stop dates reproduced below is in terms of days following date of original. This order does not apply when physician's order indicates exact number of doses and/or days to be administered.

**Do Not Use the following Abbreviations:**

u, UI, qd, qod, Ug, MS, MSO4, MgSO4  
 Never write a zero by itself after a decimal point - i.e. write 5 mg  
 Always use a zero before a decimal point - i.e. write 0.5 mg

# PROVIDENCE HOSPITALS EMERGENCY DEPARTMENT AFTERCARE INSTRUCTIONS



WHITE LABEL  
A# E00112132980 U#Z000070093  
10/31/07 F 84 11/24/22  
Ilsley, Jeffrey E

YOUR DIAGNOSIS TODAY IS:

ADDRESSOGRAPH

The Providence Hospital Emergency Department is available twenty-four hours daily. Thank you for using us for medical care. The examination and treatment you have received in the Emergency Department has been rendered on an emergency basis and is NOT intended to be a substitute for an effort to provide complete medical care. It is important that you keep your follow-up appointment as directed and that you report any new or remaining problems to the physician who sees you for follow-up. Follow the instructions below as indicated for you. If you are worried about your illness and your doctor cannot be contacted. Providence Hospital Emergency Service is available for emergency care. You may call or return to the Emergency Department. Northeast 865-4530 Downtown 256-5320

### Follow-Up Care/Referral

Arrange for an appointment in \_\_\_\_\_ days with:

- Private Doctor: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Emergency Department for: \_\_\_\_\_

**Call sooner if not improving or if there is any problem.  
 Until you contact your follow-up doctor,  
 follow instructions as directed.**

### Medications Given To You In The ER:

- |                                      |                                   |   |
|--------------------------------------|-----------------------------------|---|
| <input type="checkbox"/> Tylenol     | <input type="checkbox"/> Rocephin | <input type="checkbox"/> Dilantin             |
| <input type="checkbox"/> Ibuprofen   | <input type="checkbox"/> Toradol  | <input type="checkbox"/> Lidocaine            |
| <input type="checkbox"/> Benadryl    | <input type="checkbox"/> Floxin   | <input type="checkbox"/> Mylanta/<br>Donnagel |
| <input type="checkbox"/> Tetanus     |                                   |   |
| <input type="checkbox"/> Other _____ |                                   |   |

### Medications Prescribed For You Today Are:

Drug Name	Used For

### Additional Medications/Instructions

- Take all antibiotics and until all medicine is gone.  
 Do not drink alcohol, drive or operate machinery while taking this medication.  
 Follow-up visit needed after completion of antibiotics in \_\_\_\_\_ weeks with private MD.  
 Take medications with food.  
 If rash, shortness of breath, or excessive vomiting occurs - stop medications and notify your MD or return to ER.  
 If there is no improvement after taking antibiotics for 72 hours - contact your private MD.  
 \_\_\_\_\_

### General Information And Instructions:

**X-RAYS AND EKG:** For your protection all x-rays and EKG's are reviewed by specialist physicians. If any clinically significant difference is noted between the first and final reading, you or your physician will be contacted.

**LABORATORY:** Certain lab tests and cultures require a waiting period. If any results require a change in your treatment, you or your physician will be notified. Please do not call the Emergency Department for your test results.

### Over-The-Counter Medications You Need To Take Are:

- Tylenol \_\_\_\_\_ every 4-6 hours as needed for fever or pain.  
 Ibuprofen (e.g.: Motrin, Advil) \_\_\_\_\_ every 6 hours as needed for fever or pain. Take with food.  
 Benadryl \_\_\_\_\_ every 6 hours as needed for itching.  
 \_\_\_\_\_

### Fact Sheets Given:

Other Instructions: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I have received and understand the above instructions for aftercare. I understand that I have had emergency treatment only, which is not a substitute for continuing medical care. I will arrange for follow-up care as instructed.

Patient/Family Member: \_\_\_\_\_



# PROVIDENCE HOSPITALS EMERGENCY DEPARTMENT AFTERCARE INSTRUCTIONS



WHITE LABEL R  
A# E00112138615 U#Z000049371  
11/02/07 F 84 11/24/22  
Hayes, Michael T

DIAGNOSIS TODAY IS: Urinary Tract Infection

ADDRESSOGRAPH

The Providence Hospital Emergency Department is available twenty-four hours daily. Thank you for using us for medical care. The examination and treatment you have received in the Emergency Department has been rendered on an emergency basis and is NOT intended to be a substitute for an effort to provide complete medical care. It is important that you keep your follow-up appointment as directed that you report any new or remaining problems to the physician who sees you for follow-up. Follow the instructions below as indicated for you. If you are worried about your illness and your doctor cannot be contacted, Providence Hospital Emergency Service is available for emergency care. You may call or return to the Emergency Department. Northeast 865-4530 Downtown 256-5320

Follow-Up Care/Referral	Medications Prescribed For You Today Are:								
Arrange for an appointment in _____ days with: <input checked="" type="checkbox"/> Private Doctor: <u>Aspire Referral</u> <input type="checkbox"/> Phone Number: _____ <input checked="" type="checkbox"/> Emergency Department for: <u>765-0099</u>  Call sooner if not improving or if there is any problem. Until you contact your follow-up doctor, follow instructions as directed.	<table border="1"> <thead> <tr> <th>Drug Name</th> <th>Used For</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Drug Name	Used For						
Drug Name	Used For								

Medications Given To You In The ER:	Additional Medications/Instructions
<input type="checkbox"/> Tylenol <input type="checkbox"/> Rocephin <input type="checkbox"/> Dilantin <input type="checkbox"/> Ibuprofen <input type="checkbox"/> Toradol <input type="checkbox"/> Lidocaine <input type="checkbox"/> Benadryl <input type="checkbox"/> Floxin <input type="checkbox"/> Mylanta/ <input type="checkbox"/> Tetanus                      Donnage <input checked="" type="checkbox"/> Other: <u>Levaquin 500mg qd</u> <u>IV H.S CNS II</u>	<input type="checkbox"/> Take all antibiotics and until all medicine is gone. <input type="checkbox"/> Do not drink alcohol, drive or operate machinery while taking medication. <input type="checkbox"/> Follow-up visit needed after completion of antibiotics in _____ weeks with private MD. <input type="checkbox"/> Take medications with food. <input type="checkbox"/> If rash, shortness of breath, or excessive vomiting occurs - stop medications and notify your MD or return to ER. <input type="checkbox"/> If there is no improvement after taking antibiotics for 72 hours contact your private MD. <input type="checkbox"/> _____

General Information And Instructions:	Over-The-Counter Medications You Need To Take
X-RAYS AND EKG: For your protection all x-rays and EKG's are reviewed by specialist physicians. If any clinically significant difference is noted between the first and final reading, you or your physician will be contacted.  LABORATORY: Certain lab tests and cultures require a waiting period. If any results require a change in your treatment, you or your physician will be notified. Please do not call the Emergency Department for your test results.	<input type="checkbox"/> Tylenol _____ every 4-6 hours as needed for fever or <input type="checkbox"/> Ibuprofen (e.g.: Motrin, Advil) _____ every 6 hours for fever or pain. Take with food. <input type="checkbox"/> Benadryl _____ every 6 hours as needed for itching <input type="checkbox"/> _____

Fact Sheets Given:

Other Instructions: (1) PT IS A DNR  
(2) Health Care Coordinator, TU call  
Regency Hospice Tomorrow TU Arr  
Services

I have received and understand the above instructions for aftercare. I understand that I have had emergency treatment only, which is not intended to be a substitute for an effort to provide complete medical care.

FAIRFIELD COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

PHYSICIAN ORDER FORM

White, Mabel

PHYSICIAN ORDERS	REASON
<p>Cipro 500mg (#10) <math>\dot{\bar{t}}</math> QD x 10 days                      noted 10/31/07 <i>[Signature]</i></p>	<p>UTI</p>



EMERGENCY DEPARTMENT

*bell I usy B I 2-555-1*

2435 Forest Drive  
Columbia, SC 29204  
(803) 236-5220

120 Gateway Corporate Blvd.  
Columbia, SC 29203  
(803) 865-4530

Richard A. Boyer, MD  
SC Lic # 9408  
DEA # AB8750766

Anoma Gamage, MD  
SC Lic # 22010  
DEA # BG5440867

Michael Hayes, MD  
SC Lic # 17402  
DEA # BH3158486

Donald G. Moore, MD  
SC Lic # 11453  
DEA # AM1668346

D. Langston Powell, MD  
SC Lic # 14015  
DEA # BP0964976

Michael P. Taillon, MD  
SC Lic # 13613  
DEA # BT0941737

David C. Winn, MD  
SC Lic # 3733  
DEA # BW1140970

Michael R. Zeno, Jr., DO  
SC Lic # 0191  
DEA # BZ0424159

DA

WHITE MABEL  
 N# A# E00112132980 U#Z000070093  
 10/31/07 F 84 11/24/22  
 AE IIsley, Jeffrey E

Label with Drug Name / Strength	No.	DIRECTIONS	Refill
Cipro 500	10	$\dot{\bar{t}}$ PO QD <i>noted 10/31/07 [Signature]</i>	0

M.D./D.O.

*[Signature]*  
SUBSTITUTION PERMITTED

M.D./D.O.

DISPENSE AS WRITTEN

(MH003 (4-05))

PHYSICIAN SIGNATURE: \_\_\_\_\_

FAIRFIELD COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

NURSING NOTES

NAME	First	Middle	MR	FILE#	Allergies
11/3/07	2070	White			
<p>Hsp had diarrhea x3 today light brown watery stools TF output @ 35cc/hr. Total amt of Foley, 400cc in past 12 hours. Delirium @ 97% continues on Cipro for UTI urine is yellow and clear.</p>					
11-4-07	0530				
<p>Continuing on ABT / cipro for URIC UTI - afebrile - T 97.8 (ax) - HOB 90° - 02 on 2L N.S. c sats 93% T7 cont. as ordered, 5 difficulties - - Foley cath patent &amp; drng cloudy yellow urine &amp; thick mucous sediment noted - - no S/S of distress noted &amp; no adverse reactions noted from ABT.</p>					
11/5/07	0400				
<p>In bed resting quietly c, 02 on 2L NC - HOB 90° - resp. even &amp; unlabored - - T7 cont. as ordered, 5 difficulties - T7 held only in shift, RIT residual &gt; 50cc's x 20 T. good effect of ABT, continue c/o adverse reactions noted.</p>					
0630					
<p>per tube c yellow/white drng, sm amt, sleeping (from Hsp) - area cleaned &amp; ds applied - D for c a minute ago of blood noted today - DS 1.0, as ordered. When next tube Foley output bag, green thick mucous sediment noted before emptying and bag before urine (amber colored urine) - approximately 500 CC's of green sediment noted from tube - will continue to monitor.</p>					
11-5-07	2pm				
<p>VS - B/P 116/56 P 74 RR 19 T 97.7 ax SpO2 @ 98%. Consumer resting in bed receiving O2 @ 2L via NC. Has C tube receiving normal 1 cal 35ml/hr continuous feed. 18-Pr indwelling cath draining yellow urine c yellowish/green sediment. Will continue to monitor.</p>					
11-5-07	2330				
<p>O2 Sat 98% @ 2L NC, HOB 90°, SRT x2. T &amp; P 92h + Pw, Suctioned small amt frothy white secretions orally x3 this shift &amp; resp. distress noted. Bedrest maintained. Comfort measures in place. Foley Catheter output 275cc cloudy amber colored urine to gravity bag, Catheter bulb noted to be broken, briefs on @ this time until replacement catheter arrives tomorrow per Hospice. Stools loose, brownish yellow in color c small amt mucous noted x2 this shift, inconst. care rendered. ABT continues 5 S/E or adv. reaction noted.</p>					

Mary Mills RN

NURSING NOTES

Last Name	First	MI	File #	Allergies
White	Mabel			
Date	Hour	Nurses Notes		
1-6-07	10AM	VS SpO <sub>2</sub> @ 93% B/P 86/36 P130 R44 T101.4 ay — M. Mills RN		
	10:20AM	18Fr indwelling catheter replaced with holding 30cc sterile water draining yellow urine & mucous yellow-greenish sediment.		
		Receiving O <sub>2</sub> @ 2L via NC. Amelite local via @ tube @ 35ml/hr.		
		Continuous until new orders arrive of two cal HN @ 25ml/hr		
		increase by 5ml qd to goal of 35ml/hr & flush @ 150cc H <sub>2</sub> O		
		q 4 hrs. monitor hydration status to prevent dehydration &		
		concentrated TF. SP 1 & 2. suction 4x daily and P.A.T. will		
		continue to monitor — Mary Mills RN		



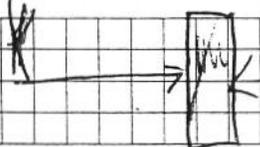
# MEDICATION ASSISTANCE RECORD

P&L FORMS #3023 (for A03 print programs)

Medications	Hour	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
PREMETS 2700 SOLUTAB TWO 1 TABS TWICE DAILY SEE DIRECTIONS FOR FULL INSTRUCTIONS ON BOTTLE OF BOX.	7:30																														
BAR-PAGE LIQUID RX DRG ONE 1/2 TEASPOONFUL TWICE DAILY WITH OR WITHOUT MEALS.	BAM																														
DIURETIC TABS ONE 1/2 TABS TWICE DAILY OR ONE TABS QD WITH MEALS.	BAM																														
DEMLITE 1 ORAL LIQUID TWO FEEDINGS W/ DEMLITE 1 TAB 1 FEEDING CONTINUOUS PER 2 TUBE.	BAM	order Δ'ed Oct 8, 2007																													
2 TUBE DIURETIC TABLETS ONE 1/2 TABS TWICE DAILY OR ONE TABS QD WITH MEALS.	BAM																														
DIURETIC TABLETS ONE 1/2 TABS TWICE DAILY OR ONE TABS QD WITH MEALS.	BAM																														
DIURETIC TABLETS ONE 1/2 TABS TWICE DAILY OR ONE TABS QD WITH MEALS.	BAM																														
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DIURETIC TABLETS ONE 1/2 TABS TWICE DAILY OR ONE TABS QD WITH MEALS.	BAM																														
DIURETIC TABLETS ONE 1/2 TABS TWICE DAILY OR ONE TABS QD WITH MEALS.	BAM																														

\* (12A - 8A shift) \*

order Δ'ed Oct 8, 2007



Charting For 11/29/07 Through 11/29/07

Physician: \_\_\_\_\_ Telephone No. \_\_\_\_\_ Medical Record No. \_\_\_\_\_  
 Alt. Phys. \_\_\_\_\_ Alt. Telephone \_\_\_\_\_  
 Allergies: \_\_\_\_\_ Rehabilitative Potential \_\_\_\_\_  
 Admission Date: \_\_\_\_\_  
 Medicaid Number: \_\_\_\_\_ Medicare Number: \_\_\_\_\_ Complete Entries Checked: \_\_\_\_\_  
 By: M. Mills LPN Title: \_\_\_\_\_ Date: 11-29-07  
 Patient: \_\_\_\_\_ Sex: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Resident Code: \_\_\_\_\_ Room No.: \_\_\_\_\_ Bed: \_\_\_\_\_ Facility Code: \_\_\_\_\_











**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**ROBERT L. STECK, A.P.R.N.**  
License No. APN.1285

OIE # 2009-286

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing will consider the Memorandum of Agreement in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 1:00 PM\* in Room 108, Kingtree Building, 110 Centerview Drive, Columbia, South Carolina.** The Memorandum of Agreement, together with the exhibits in evidence, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Memorandum of Agreement for the purpose of determining its action thereon.

FURTHER, Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and shall be subject to cross-examination regarding this matter. The Board may pose questions and request documents with regard to the complaint. Respondent and/or Respondent's counsel may present mitigating testimony and other evidence to the Board regarding an appropriate sanction in this matter. The Board will issue a Final Order based on the Agreement and on the information provided at the hearing.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
THE STATE BOARD OF NURSING**

  
\_\_\_\_\_  
Jocelyn T. Andino  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

Columbia, South Carolina

01 / 20 / 10

\*Hearing times are subject to change

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING

IN THE MATTER OF:

ROBERT L. STECK, A.P.R.N.  
License No. APN.1285

OIE # 2009-286

Respondent.

MEMORANDUM OF AGREEMENT  
AND STIPULATIONS

**WHEREAS**, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Robert L. Steck, Advanced Practice Registered Nurse; and

**WHEREAS**, Respondent, admitting the allegations, has advised that he wishes to waive formal hearing procedures and dispose of this matter pursuant to S.C. Code Ann. § 1-23-320(f) (1976, as amended), in lieu of, *inter alia*, a hearing before a hearing officer or panel appointed by the Board; and

**WHEREAS**, Respondent will participate in a Final Order Hearing pursuant to S.C. Code Ann. § 40-1-10 *et seq.* (1976, as amended) at such time as the Board shall require for the purpose of determining an appropriate sanction.

**THEREFORE, RESPONDENT STIPULATES AND ADMITS** to the following facts, along with the exhibits and other material referenced herein, to be considered by the Board in determining an appropriate sanction in connection with the disciplinary matter pending against Respondent:

1. That Respondent is an Advanced Practice Registered Nurse duly licensed by the Board to practice in South Carolina, was so licensed at all times relevant to the matters asserted in this case, and is subject to the jurisdiction of the Board.
2. That on March 18, 2008, while employed as a CRNA at Carolina Plastic Surgery in Spartanburg, S.C., Respondent administered a general anesthetic with IV medications to a patient, without confirming that the patient's physician was in the office to provide proper supervision. Respondent contends that his actions were not intentional but that he thought the physician was in the building and that a breakdown in communication prevented him and the rest of the staff from knowing that the physician had left the office. In addition, Respondent contends that there were other physicians in the office who could have provided assistance if needed.

**RESPONDENT ADMITS** that the aforementioned acts of Respondent present grounds that constitute misconduct, as alleged. Respondent further admits that as a result of the previous admissions herein, Respondent has violated S.C. Code Ann. § 40-1-110(f) (1976, as amended).

**RESPONDENT AGREES** that at the Final Order Hearing Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and be subject to cross-examination regarding this matter and Respondent's practice. Respondent's answers may be considered by the Board in rendering its decision. Respondent may present mitigating testimony and other evidence to the Board regarding an **appropriate sanction** in this matter.

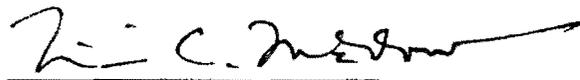
**IN WITNESS WHEREOF**, the parties hereto, having agreed to the matters related above, have executed this Memorandum of Agreement and Stipulations, to be effective the latter date appearing below.

**AND IT IS SO AGREED.**

12/27, 2009

  
ROBERT L. STECK, APRN  
RESPONDENT

1/18 2010  
~~2009~~

  
WITNESS or ATTORNEY

Jan. 20, 2010, 2009

  
JOCELYN D. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
P.O. Box 11329  
Columbia, SC 29211-1329

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

In the Matter of:

**ROBERT L. STECK, A.P.R.N.**  
License No. 1285

OIE #2009-286

Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice of Final Order Hearing and a copy of the Memorandum of Agreement** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Mr. William C. McDow  
Richardson Plowden Robinson, P.A.  
P.O. Box 7788  
Columbia, SC 29202

SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING & REGULATION

*Krystal J McFadden*

Krystal J McFadden  
Administrative Assistant  
LLR-Office of General Counsel  
Post Office Box 11329  
Columbia SC 29211 1329

7008 1140 0000 7039 8781

**U.S. Postal Service**  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

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**OFFICIAL USE**

Postage	\$	1/21/10 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

To: Mr. William C. McDow  
Richardson Plowden Robinson, P.A.

Send to: [Redacted]  
Street or P.O. Box: [Redacted]  
City: [Redacted]

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**ADAM CHRISTOPHER NEWELL, R.N.**  
License No. RN.97670

OIE # 2008-67

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

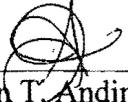
TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing will consider the Memorandum of Agreement in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 1:30 PM\* in Room 108**, Kingtree Building, 110 Centerview Drive, Columbia, South Carolina. The Memorandum of Agreement, together with the exhibits in evidence, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Memorandum of Agreement for the purpose of determining its action thereon.

FURTHER, Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and shall be subject to cross-examination regarding this matter. The Board may pose questions and request documents with regard to the complaint. Respondent and/or Respondent's counsel may present mitigating testimony and other evidence to the Board regarding an appropriate sanction in this matter. The Board will issue a Final Order based on the Agreement and on the information provided at the hearing.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
THE STATE BOARD OF NURSING**

  
\_\_\_\_\_  
Jocelyn T. Andino  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

Columbia, South Carolina

02 / 18 / 10

\*Hearing times are subject to change

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING**

In the Matter of:

**ADAM CHRISTOPHER NEWELL, R.N.,**  
License No. 97670

OIE 2008-67

Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice of Final Order Hearing and a copy of the Memorandum of Agreement and Stipulations** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, regular first class mail, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Ms. Desa Ballard  
226 State Street  
West Columbia, SC 29169

*Krystal McFadden*  
Krystal McFadden, Administrative Assistant  
LLR-Office of General Counsel  
Post Office Box 11329  
Columbia SC 29211 1329

7008 1140 0000 7033 7744

<b>U.S. Postal Service</b>	
<b>CERTIFIED MAIL RECEIPT</b>	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
Postage \$	2/19/10 Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Price	
Sent To	Ms. Desa Ballard
Street, Ap or PO Box	Law Offices of Desa Ballard 226 State Street
City, State	West Columbia, SC 29169
PS Form 3800, August 2005 See Reverse for Instructions	

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING

IN THE MATTER OF:

ADAM CHRISTOPHER NEWELL, R.N.  
License No. RN.97670

OIE # 2008-67

Respondent.

MEMORANDUM OF AGREEMENT  
AND STIPULATIONS

**WHEREAS**, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Adam C. Newell, Registered Nurse; and

**WHEREAS**, Respondent, admitting the allegations, has advised that he wishes to waive formal hearing procedures and dispose of this matter pursuant to S.C. Code Ann. § 1-23-320(f) (1976, as amended), in lieu of, *inter alia*, a hearing before a hearing officer or panel appointed by the Board; and

**WHEREAS**, Respondent will participate in a Final Order Hearing pursuant to S.C. Code Ann. § 40-1-10 *et seq.* (1976, as amended) at such time as the Board shall require for the purpose of determining an appropriate sanction.

**THEREFORE, RESPONDENT STIPULATES AND ADMITS** to the following facts, along with the exhibits and other material referenced herein, to be considered by the Board in determining an appropriate sanction in connection with the disciplinary matter pending against Respondent:

1. That Respondent is a Registered Nurse duly licensed by the Board to practice in South Carolina, was so licensed at all times relevant to the matters asserted in this case, and is subject to the jurisdiction of the Board.
2. That on January 14, 2008, while working the 7 PM to 7 AM shift on the SICU at Roper Hospital, in Charleston, S.C., Respondent failed to document patient assessment and condition changes for the two patients assigned to him. In addition, Respondent failed to notify the attending physician of condition changes for those patients. One patient was in respiratory distress and the other patient had low urine output.

**RESPONDENT ADMITS** that the aforementioned acts of Respondent present grounds that constitute misconduct, as alleged. Respondent further admits that as a result of the previous admissions herein, Respondent has violated S.C. Code Ann. §§ 40-33-110(A)(18) and 40-1-110(f) (1976, as amended).

**RESPONDENT AGREES** that at the Final Order Hearing Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and be subject to cross-examination regarding this matter and Respondent's practice. Respondent's answers may be considered by the Board in rendering its decision. Respondent may present mitigating testimony and other evidence to the Board regarding an **appropriate sanction** in this matter.

**IN WITNESS WHEREOF**, the parties hereto, having agreed to the matters related above, have executed this Memorandum of Agreement and Stipulations, to be effective the latter date appearing below.

**AND IT IS SO AGREED.**

October, 25, 2009

Adam C. Newell RN  
ADAM CHRISTOPHER NEWELL, R.N.  
RESPONDENT

October 25, 2009

Amy Belk  
WITNESS or ATTORNEY

November 12, 2009

Joelyn P. Andino  
JOCELYN P. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
P.O. Box 11329  
Columbia, SC 29211-1329

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**GINGER L. GALLOWAY, R.N.**

License No. RN.39336

OGC # 05-0075

OIE # 2003-136

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing will consider the Memorandum of Agreement in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 2:00 PM\* in Room 108, Kingtree Building, 110 Centerview Drive, Columbia, South Carolina.** The Memorandum of Agreement, together with the exhibits in evidence, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Memorandum of Agreement for the purpose of determining its action thereon.

FURTHER, Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and shall be subject to cross-examination regarding this matter. The Board may pose questions and request documents with regard to the complaint. Respondent and/or Respondent's counsel may present mitigating testimony and other evidence to the Board regarding an appropriate sanction in this matter. The Board will issue a Final Order based on the Agreement and on the information provided at the hearing.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
THE STATE BOARD OF NURSING**

  
\_\_\_\_\_  
Jocelyn T. Andino  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

Columbia, South Carolina

02 / 18 / 10

\*Hearing times are subject to change

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING

IN THE MATTER OF:

GINGER L. GALLOWAY, R.N.  
License No. RN.39336

OGC # 05-0075  
OIE # 2003-136

Respondent.

MEMORANDUM OF AGREEMENT  
AND STIPULATIONS

WHEREAS, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Ginger L. Galloway, Respondent; and

WHEREAS, a Complaint has been served and filed, alleging that Respondent has violated S.C. Code Ann. § 40-33-5, *et seq.* (1976, as amended) and the Rules and Regulations of the South Carolina Board of Nursing. A copy of the Complaint, dated June 17, 2009, is attached hereto and incorporated herein as Exhibit 1.

WHEREAS, Respondent, admitting the allegations, has advised that she wishes to waive formal hearing procedures and dispose of this matter pursuant to S.C. Code Ann. § 1-23-320(f) (1976, as amended), in lieu of, *inter alia*, a hearing before a hearing officer or panel appointed by the Board; and

WHEREAS, Respondent will participate in a Final Order Hearing pursuant to S.C. Code Ann. § 40-1-10 *et seq.* (1976, as amended) at such time as the Board shall require for the purpose of determining an appropriate sanction.

THEREFORE, RESPONDENT STIPULATES AND ADMITS to the following facts, along with the exhibits and other material referenced herein, to be considered by the Board in determining an appropriate sanction in connection with the disciplinary matter pending against Respondent:

1. That Respondent is a Registered Nurse duly licensed by the Board to practice in South Carolina, was so licensed at all times relevant to the matters asserted in this case, and is subject to the jurisdiction of the Board.
2. That on or about March 11, 2003, Respondent tested positive for cocaine on a court-ordered hair follicle test. A copy of the Laboratory Results is attached hereto and incorporated herein as Exhibit 2.
3. That on or about June 11, 2003, Respondent entered into Intensive Outpatient Treatment (IOP) at the Dawn Center in Orangeburg, S.C. She was diagnosed with

Cocaine Dependence. On July 10, 2003, Respondent was discharged as being in early full remission.

**RESPONDENT ADMITS** that the aforementioned acts of Respondent present grounds that constitute misconduct, as alleged.

**RESPONDENT AGREES** that at the Final Order Hearing Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and be subject to cross-examination regarding this matter and Respondent's practice. Respondent's answers may be considered by the Board in rendering its decision. Respondent may present mitigating testimony and other evidence to the Board regarding an appropriate sanction in this matter.

**IN WITNESS WHEREOF**, the parties hereto, having agreed to the matters related above, have executed this Memorandum of Agreement and Stipulations, to be effective the latter date appearing below.

**AND IT IS SO AGREED.**

9/25/, 2009

*Ginger L. Galloway R.N.*  
GINGER L. GALLOWAY, R.N.  
RESPONDENT

9-25-, 2009

*Patricia J. Pruitt*  
WITNESS or ATTORNEY  
NOTARY expires 7-29-2012

09-28-, 2009

*Jocelyn T. Andino*  
JOCELYN T. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
P.O. Box 11329  
Columbia, SC 29211-1329

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING

IN THE MATTER OF:

GINGER L. GALLOWAY, R.N.  
License No. RN.39336

OGC # 05-0075  
OIE # 2003-136

FORMAL COMPLAINT

Respondent.

The South Carolina Board of Nursing, hereinafter referred to as the Board, alleges that:

I.

Respondent is a Registered Nurse duly licensed by the Board to practice in South Carolina and was so licensed at all times relevant to the matters asserted in this case. This Board has jurisdiction over Respondent and the subject matter of this action.

II.

The Board received an initial complaint and notification, as required by law, and investigated Respondent's conduct.

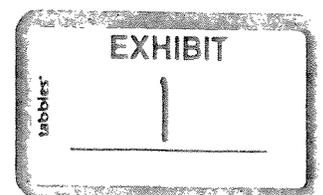
III.

Upon information and belief, Respondent has engaged in certain conduct that violates provisions of the South Carolina Nurse Practice Act (S.C. Code Ann. § 40-33-10, *et seq.* (1976, as amended)) and the Rules and Regulations of the Board, including the commission of the following acts:

- A. That on or about March 11, 2003, Respondent tested positive for cocaine on a court-ordered hair follicle test.
- B. That on or about June 11, 2003, Respondent entered into Intensive Outpatient Treatment (IOP) at the Dawn Center in Orangeburg, S.C. She was diagnosed with Cocaine Dependence. On July 10, 2003, Respondent was discharged as being in early full remission.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. §§ 40-33-110(A)(1) and 40-1-110(f) (1976, as amended), in the following particulars:



- A. Respondent has violated § 40-33-110(A)(1) (1976, as amended), in that she has violated a federal, state, or local law involving alcohol or drugs or committed an act involving a crime of moral turpitude, as evidenced by Respondent testing positive for cocaine.
- B. Respondent has violated § 40-1-110(f) (1976, as amended), in that has committed a dishonorable, unethical, or unprofessional act that is likely to deceive, defraud, or harm the public, as evidenced by her positive test for cocaine.

V.

PURSUANT to S.C. Code Ann. § 40-33-110 (1976, as amended), the Board has the authority to order the revocation or suspension of a license to practice nursing, publicly or privately reprimand the licensee, or take other reasonable action short of revocation or suspension, such as requiring the licensee to undertake additional professional training subject to the direction and supervision of the Board, or imposing restraints upon the practice of the licensee as circumstances warrant until the licensee demonstrates to the Board adequate professional competence. Additionally, the Board may require the licensee to pay a civil penalty of up to two thousand dollars (\$2,000.00) to the Board for each violation, up to a total of ten thousand dollars (\$10,000.00).

THEREFORE, the Board will consider these allegations and make such disposition as may be appropriate. You may respond and present evidence and argument on all issues involved. You may appear alone or with legal counsel.

SOUTH CAROLINA BOARD OF NURSING

06 / 17 / 09  
Date

BY:   
JOCELYN T. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
Post Office Box 11329  
Columbia, South Carolina 29211-1329

West Diagnostics Incorporated

# LABORATORY RESULTS

Facsimile Copy

4230 Burnham Avenue, Suite 250  
Las Vegas, NV 89119 (702) 733-7866

PATIENT GALLOWAY, GINGER

PHONET 1466

REFERRED BY RANDOM DRUG SCREEN, INC.

AGE/SEX 99Y F

ACCESSION # 01817523

1345 GARNER LANE, STE 303-A

COLLECTED 03/11/2003 14:33

MED. RECORD # 0012691086

RECEIVED 03/12/2003 16:47

CHART # 04085418

COLUMBIA, SC 29210

TOX NO. 030073064 X

S.S.# 250-23-7991

TEST NAME - SPECIMEN (030073064)

PROFILE 870 - HAIR

Reason: Other

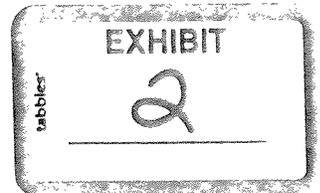
RESULTS: Amphetamines (Group)	Negative
Cocaine/Metabolite(s)	<b>**POSITIVE**</b>
Opiates (Group)	Negative
Phencyclidine (PCP)	Negative
Cannabinoids (Marijuana)	Negative

\*FINDINGS: Cocaine 23212 pg/mg and Benzoyllecgonine 2239 pg/mg IDENTIFIED

This specimen was screened by immunoassay (IA). Positives were confirmed by gas chromatography-mass spectrometry (GC/MS) or GC/MS/MS at the following screening/confirmation cutoffs:

Drug	Screen/Confirm
Methamphetamine/Amphetamine/MDMA	300/300 pg/mg
Cocaine/Metabolite	300/300 pg/mg
Identified Opiates	500/500 pg/mg
THC	/5 pg/mg
THC-COOH	1.0/0.1 pg/mg
Phencyclidine (PCP)	300/300 pg/mg

If a drug was reported negative, it means that either no drug was detected, or if a drug was detected, it was present at a concentration less than the laboratory's established cutoff level.



**Respondent's  
Statement &  
Letters of Support**

To: The State Board of Nursing of South Carolina  
Re: Ginger Galloway RN License No. RN 39336  
OGC # 05-0075  
OIE # 2003-136

As a Professional, Accountable Registered Nurse I have fulfilled my obligations of rehabilitation by the following:

- 1) Completion of an Intensive 5 day per week outpatient Treatment at the Dawn Center in Orangeburg, SC.
- 2) Completion of an aftercare program at the Dawn Center 3 nights per week 7/03-12/03
- 3) Weekly AA /NA meetings with regular attendance
- 4) Medical Care Supervision by Dr. William Circler for ADHD/depression and med compliance
- 5) Regular Scheduled Psychotherapy with Dr. Nicholas Lind at Post Trauma Resources 05-06
- 6) Random negative urine drug screens that were done from 2003-to present- Will present at Board Meeting
- 7) Included professional references from persons knowing and or working with me at the time of the complaint
- 8) Commitment to Professionalism by leadership supervision in several roles from 2003-2008. Most recent was Patient Care Coordinator at Advantage Hospice. Supervised staff of 20 staff to include nurses certified nursing assistants, chaplains, social workers and volunteers as well as administrative staff.
- 9) Actively volunteers to sponsor new AA/NA fellows. Would consider volunteer With the SC Recovering Professional Program

The essence of the healing arts is to save, rehabilitate and restore those who are ill to good health. I feel that nurses deserve the same as their patients from their brothers and sisters in the profession. If I can give back in some way to a nurse that is burdened with the disease of dependency, I would like very much to do that.

I would ask the board that because this complaint has been since 2003 and has been signed and submitted to three different board lawyers on 3 separate occasions, I would respectfully ask that I not be publicly reprimanded.

Sincerely,



Ginger Galloway

To: The South Carolina State Board of Nursing  
Re: Ginger Galloway RN License # 39336

I am writing on behalf of Ginger Galloway RN. She has been employed at Ascension Hospice since April 2004. Ginger provided to me information regarding the formal complaint stemming from a call from her very vindictive husband about her positive hair follicle test.

Since being employed here, Ginger has been an outstanding leader and preceptor. She has never come to work appearing to be under the influence of any medication or alcohol. I personally know that she attends regular AA meetings. There have never been any complaints from patients or families regarding care or medications. Ginger's compassion and knowledge of end of life issues are what keep patients calling wanting her as their nurse.

She has been admission nurse. Being able to change direction at any point in the day she has independently covered more than 200 miles in 1 day. She volunteers for extra call and does not require supervision in the field.

She has been under regular medical care by Dr. William Crigler. She has always been prompt in coming to the office when called. She has had one urine drug screen which was negative.

She holds regular inservices for the staff. She attracted the Orangeburg Area Medical Director and was team leader for that county as well as Calhoun County. She supervised 3 nurses and 5 CNAs Sincerely, staff as well as 1 chaplain and a social worker.

I would say that she shows her rehabilitation on a daily basis. She has on 2 known occasions spoke with an applicant who has known drug dependency issues and has given her support. I feel she is a competent nurse that practices nursing with high regard to ethics, morals, and professional standards. Her professional conduct as well as her compassionate bedside manner helps to show that she is unlikely to ever commit any violation of the Nurse Practice Act again.

Sincerely,



Mary F. Williams, RNC  
DON Ascension Hospice

September 23, 2009

South Carolina Board of Nursing  
Synergy Business Park  
Kingstree Bldg  
110 Centerview Dr., Suite 202  
Columbia, SC 29210

To Whom It May Concern:

Ginger Galloway has been working as an RN for Senior Primary Care Practice- Parkridge since October 2008. She functions well as a clinical nurse caring for patients and their needs during their office visits. She also handles phone triage, Home Health concerns, follow up labs/testing, etc, for our patients. Her documentation is clear and professional. She provides valuable information when discussing patient concern/problems with staff and physicians. She continues to be a good team member for our office.

Sincerely,

A handwritten signature in cursive script, appearing to read "Esther Axson".

Esther Axson  
Nurse Manager  
SPCP-Parkridge  
190 Parkridge Dr., Suite G-100  
Columbia, SC 29212

September 24, 2009

To Whom It May Concern:

I confirm that Ginger and I worked together for Advantage Hospice and HomeCare for approximately one and a half years. I enjoyed working with her rather than any other coworker I have had the pleasure of working with. She is very compassionate and caring. Ginger continued to impress me with her quick thinking and great problem solving when it comes to pain management for hospice patients. She is very good communicating with patients and can bring a sense of calmness to the worst situation. She is team oriented which makes her an excellent employee in the medical field. Throughout the time I worked with Ginger I learned many things about hospice. I learned about end of life care and truly enjoyed working with her and becoming friends with her. She is a determined, compassionate person and would be an asset in any aspect in the medical field. I'm happy to provide further information if required. You may call me at 803-807-1238 should you have any questions.

Sincerely,

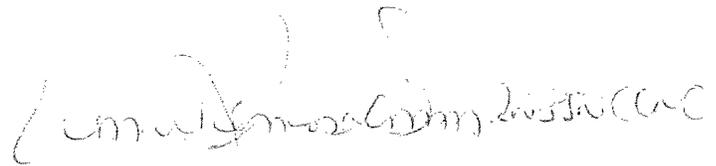
A handwritten signature in cursive script that reads "Georgia L. Goudelock". The signature is written in black ink and is positioned below the word "Sincerely,".

Georgia L. Goudelock

To Whom it May Concern,

My name is Eunice Denise Sims RN, BSN CLNC. I am writing to assist Ms. Ginger Galloway RN, in her attempt to show proof of her competency. I have know Ms. Galloway in a professional and personal capacity. Ms. Galloway in a professional capacity is the type of nurse you would enjoy having on your team. Ms. Galloway is very trust worthy ,faithful, and competent in her role as a professional nurse. Ms. Galloway was my preceptor, when I became involved in hospice. She made the transition for me from a hospital critical care nurse, into a community and family oriented hospice nurse. Ms. Galloway, has a very good repore with her Clients and families. She is the type of nurse that is willing to teach and at the same time can be taught when the situation arises. She, is the type of nurse who works long hours and will go that extra mile when the next nurse is unable to fill the need. Ms. Galloway, is always the nurse who will make the best of what the situation is and move forward, and be successful at her intended goals. In the best description, she is a true leader and a positive role model for the nurses, clients and families she has the privilege to reach out and touch everyday. In closing, I would like to add, that it is a great pleasure and honor to be able to work with such a nurse, and to know when there is a need for help or guidance, on a professional or personal level, she is a good choice; because she can separate professional from personal and help get to the goal at hand.

Sincerely,

A handwritten signature in black ink, appearing to read "Eunice Denise Sims RN BSN CLNC". The signature is written in a cursive, somewhat stylized font.

Eunice Denise Sims RN BSN CLNC

# EAU CLAIRE BAPTIST CHURCH

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4427 MAIN STREET • COLUMBIA, SOUTH CAROLINA 29203 • (803) 786-7769

September 20, 2007

Advantage Hospice  
3955 Southeastern Way, Suite 1A  
West Columbia, SC 29169

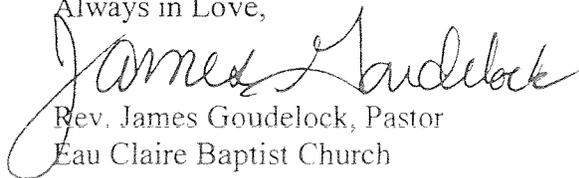
To All Staff Members,

I have been working with several of your employees over the past few months. As pastor of an elderly congregation, I am constantly dealing with illness, pain, and dying. We have lost forty-one church members in the past four years. I visit in all the area hospitals and have worked alongside several of the area hospice groups. I am very well acquainted with most of the ins and outs of patient care.

Advantage Hospice has by far been the best hospice unit with which I have worked. Each of you has been patient, caring and attentive to the members of our church under your care. Over the past few weeks we have been dealing with the illness and subsequent death of Mr. A. V. Lee. Your staff was superb in meeting the needs of his entire family. I observed them as they made their initial consultation, then his ambulatory care, later his confinement to bed, and the death call on September 18, 2007.

I can't remember all the names, but as Mr. Lee's pastor, I want to personally thank Heather Liafsha, Ginger Galloway, Latrell Hill, Georgia Goudelock and those behind the scene I haven't met. Your gentle, patient and professional spirits were deeply appreciated by the family. They have said many times how thankful they were to Advantage Hospice.

Always in Love,



Rev. James Goudelock, Pastor  
Eau Claire Baptist Church  
4427 North Main Street  
Columbia, SC 29203  
803.786.7769

March 12, 2006

To Whom It May Concern:

I am an ordained Lutheran minister, now retired after 30 years as a parish pastor. I am employed part time with Ascension Hospice. I have known Ms. Ginger Galloway for more than 18 months in my capacity as Chaplain. As part of our respective work roles, we have from 2-3 contacts per week.

Ms.Galloway has been extremely sensitive to patients' needs for spiritual assessment and support. She has made frequent referrals of patients for Chaplaincy contacts. In situations of death, Ms. Galloway has facilitated families' grief work as she affirmed their need for prayers and times of remembrance. At the time of death, I can depend upon her immediate call for the presence of the Chaplain as she recognizes this as a vital part of the Hospice role in their lives. In all instances she has conducted herself in a most professional as well as compassionate manner with patients, their caregivers, and other staff.

With Hospice staff she emphasizes the importance of care for the patients and families. She has done much of the orientation of new staff. She has repeatedly proven affirming of the Chaplain's ministries as she introduced me to new staff and shares with them the importance of my work in the lives of those entrusted to our care.

In all observations of her work and in my contacts with her, Ms.Galloway has proven to be responsible and dedicated. She frequently gives of herself above and beyond what is required or expected. It has been a blessing and a privilege to have her as a partner in this ministry to our community.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Al Potter', followed by a horizontal line extending to the right.

The Rev. Al Potter, M.Div.  
Chaplain

(803) 238-0917  
1135 Seagull Lane  
Prosperity, SC 29127

March 20, 2005

To Whom It May Concern:

I have known Ginger Galloway since the mid part of last year, approximately September 2004. In that time I saw Ginger at least two times a week and sometimes more. She was working through Ascension Hospice in taking care of my mother-in-law. Ginger was always very pleasant and cheerful. Never once did I see any negative or worrisome actions from her. Ginger was always very "together" emotionally and with her work. We spoke on several occasions about her situation at home. She was always stable in her emotions and never once did I detect any bitterness or hostility from her concerning this situation. She was a very positive influence in my home, not only in taking care of my mother-in-law but she also became a friend to my children and to myself and my husband.

If you need any further information from me or would like to speak with me please feel free to contact me at 732-4759.

Sincerely,

  
Lisa G. Hobbs

Feb1, 2005

Ladies and Gentlemen of the State Board of Nursing of South Carolina,

Ginger Galloway RN has been my Private Duty Registered Nurse provided by my insurance company on a daily basis, 7 days a week since my near death accident in June 2003.

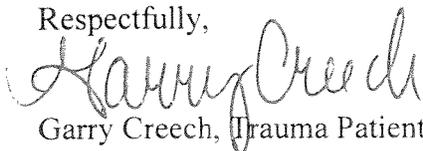
She has played multiple roles in my care. Not only has she provided all the direct medical care including dressing changes, medication, physical therapy, prosthesis training, transportation to and from the MD, she has brought me back together with my estranged family something I thought would never occur. Ginger has been that miracle.

Through my depression and having no will to live at times, she continuously motivated me, educated me and held me accountable for my recovery. During this time, Ginger was going through what most people would say a divorce out of the movies. Her ex husband constantly threatened her, refused her visitation with her child and financially broke this nurse. Still she remained upbeat, not turning to substances for answers, but turning to God for them.

She is honest. I trusted her with my drugs, mostly narcotics, never missing any. I trusted her with my banking and it was always balanced and accounted for. She regularly attends AA meetings and I went with her to one in Orangeburg. She has a sponsor and talks to her regularly.

I feel that Ginger would not ever harm a patient and her one mistake that she made has made her a better person and nurse. Ginger tries to make something positive out of what most people would say just couldn't be done. Accepting responsibility for her actions and making corrections by rehabilitative means and adhering to those means shows her professional commitment, integrity and love of her profession and her RN license that she worked so very hard to obtain.

Respectfully,

A handwritten signature in cursive script that reads "Garry Creech".

Garry Creech, Trauma Patient  
203 Whetstone Rd  
Swansea, SC

### WEEKEND RECOVERY JOURNAL

#### FRIDAY RECOVERY PLAN

1. I will attend \_\_\_\_\_ AA/NA Meetings today at \_\_\_\_\_ a.m. or p.m.
2. My relaxation activities will include: taking a nap
3. My meditation/spiritual practice will include: reading my Sabbath school lesson for Sat.
4. For leisure or fun activities I will wash my car.
5. I will build or use my support system for recovery today by calling 3 people on my list
6. If I think about using today I will pray, go to a meeting and call someone on my list.

#### COMMENTS:

#### SATURDAY RECOVERY PLAN

1. I will attend 1 AA/NA Meetings today at 12<sup>00</sup> a.m. or (p.m.) 5<sup>00</sup> pm
2. My relaxation activities will include: listening to calm music
3. My meditation/spiritual practice will include: reading the bible
4. For leisure or fun activities I will shop & go out to eat.

This information is for records  
 whose compliance with Federal  
 regulations is required in making  
 any financial statement or other  
 consent of the individual or  
 otherwise permitted by a general authoriza-  
 tion for the release of information is  
 not sufficient for this purpose.

Clinical Service Note

CSN 12/95 DAODAS FORM

Session for tonight: Understanding Addiction

Ct. attended multi-family session w/ her husband. Both were attentive and participated in discussion.

Processed video w/ ct; spouse to insure their understanding of the material presented.

This was Ct's 2nd multi-family session. She has completed COP as of today. Will begin relapse prevention on Tues. 7/15/03.

1. Clinician Signature, Title and Date Audria R. Davis, MA 7/10/03		2. Client ID# 940311	
3. Service IMP	4. <input type="checkbox"/> Billable Service <input type="checkbox"/> Non-Billable	5. Date 7/10/03	6. Client Time 1:00
7. Staff Time 1:00		8. Client Name (Last, First, MI) A	

This information has been disclosed to you from records where confidentiality is protected by Federal regulations (42 CFR Part 2) prohibit your disclosure of it without the express written consent of the person to whom it pertains.

PLACE TOP OF/CLINICAL SERVICE NOTE #8 HERE  
 tion for the release of medical or other information not sufficient for this purpose.

EXPOSE /  
 MOVE TO  
 EXPOSE /  
 MOVE TO  
 EXPOSE /  
 MOVE TO

Clinical Service Note

CSN 12/95 DAODAS FORM

- Today's session focused on traits for recovery/addiction and developing spirituality.  
 - Ct presented in a good mood, stable condition. Reports attending 5<sup>15</sup> pm meeting on <sup>7/19/03</sup> ~~last~~ yesterday afternoon where she was asked to read and do the closing prayer. Ct made contact w/ an old acquaintance who was very rude to her over the phone. She felt bad about the situation @ 1st. "She blamed me for losing my daughter." Ct stated. Praised Ct for setting a boundary w/ the acquaintance. Ct expressed that she'd only called to "my happy birthday" and not discuss anything else. Discussed traits that make ct vulnerable to addiction/relapse. Also discussed these traits that develop during recovery. Provided ct. w/ a presentation on spirituality and recovery. Ct. attentive, good participation. Ct. making strong progress. Discharge on 7/10/03.

1. Clinician Signature, Title and Date  
 Audria R. Davis, MA 7/19/03

2. Client ID#  
 940311

3. Service  
 TUD

4.  Billable Service  
 Non-Billable

5. Date

6. Client Time

7. Staff Time

8. Client Name (Last, First, MI)



CLIENT NAME: Ginger Coakley  
DATE: 3/08/05 TIME: 10:15

**DAWN CENTER**

Tri-County Commission on  
Alcohol and Drug Abuse  
P.O. Box 1166  
Orangeburg, S.C. 29116

Offices Located at:

Main Office  
910 Cook Road  
Orangeburg, S.C. 29118  
Telephone: (803) 536-4900  
Fax: (803) 531-8419

Michael C. Watson  
Treatment Facility  
P.O. Box 907  
2549 Main Highway  
Bamberg, S.C. 29003  
Telephone: (803) 245-4360

J.T. Blanton  
Treatment Facility  
Box 322  
1627 Old Belleville Road  
St. Matthews, S.C. 29135  
Telephone: (803) 655-7963

William J. McCord  
Adolescent Treatment Facility  
910 Cook Road  
Orangeburg, S.C. 29118  
Telephone: (803) 534-2328

Services:

- Education and Prevention Services
- Alcohol and Drug Safety Action Program
- Employee Assistance Program
- Offender Based Intervention Program
- School Intervention Program
- Outpatient Treatment
- Intensive Outpatient Treatment
- Residential Treatment
- Detoxification Treatment
- Adolescent Inpatient Treatment

RESULTS OF URINE SCREEN

AMPHETAMINES Neg

COCAINE Neg

THC Neg

MORPHINE Neg

ALCOHOL Neg

INFECTION

CREATININE 100  
NORMAL (20 - 100)

NITRATE 0  
NORMAL (0 - 10)

GLUTARALDEHYDE NEG  
NORMAL (NEGATIVE)

PH 4.0  
NORMAL (4.0 - 10.0)

SPECIFIC GRAVITY 1.015  
NORMAL (1.005 - 1.015)

BLEACH normal  
NORMAL/ABNORMAL

PYRIDINIUM normal  
NORMAL/ABNORMAL

TEST PERFORMED BY: JM Hett

THIS INFORMATION HAS BEEN DISCLOSED TO YOU FROM RECORDS WHOSE CONFIDENTIALITY IS PROTECTED BY FEDERAL LAW. FEDERAL REGULATIONS (42 CFR PART 2) PROHIBIT YOU FROM MAKING ANY FURTHER DISCLOSURE OF IT WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS. A GENERAL AUTHORIZATION FOR THE RELEASE OF MEDICAL OR OTHER INFORMATION IS NOT SUFFICIENT FOR THIS PURPOSE.

RANDOM DRUG SCREENS, INC.

Drug Test Results

Date: 03-31-05

Random Drug Screens, Inc.

1345 Garner Lane, Suite 303A

PH: (803 772-0027)

NAME. GINGER GALLOWAY

SS: 250-23-7991

SLIP: 41276132

REF ID: PERSONAL

COLL SITE: Random Drug Screens, Inc.  
1345 Garner Lane, Suite 303A  
Columbia, S. C. 29210

COLL BRANCH: Random Drug Screens  
COLL PHONE: (803) 772-0027  
COLL FAX: (803) 772-0095

REASON FOR TESTING: PERSONAL

SAMPLE TYPE: DRUG SCREEN (5 PANEL)

DRUG SCREENING	STATUS	CUTOFF VALUES
COCAINE MEABOLITE	NEGATIVE	300 NG/ML
AMPHETAMINE/METHAMPHETAMINE	NEGATIVE	1000 NG/ML
MARIJUANA METABOLITE	NEGATIVE	300 NG/ML
PHENCYCLIDINE	NEGATIVE	25 NG/ML
OPIATES	NEGATIVE	300 NG/ML

TESTING METHODOLOGY: INSTANT RAPID TESTING

PAGE 1

( END OF REPORT)

TESTER: Kira Greatheart-MA-CPC

TESTING INSTITUTION: RANDOM DRUG SCREENS, INC.

TEST DATE: 03-31-05

*Calouys*

# DOMINION DIAGNOSTICS

211 Circuit Drive  
North Kingstown, RI 02852  
Phone 401-667-0800 Fax 401-667-0330  
Technical Services 401-667-0901

Name: Galloway, Ginger Accession: 4544246  
 Patient Number: 250237991 Age: 42 years  
 Birth: 7/9/1960 Sex: F Collected/Drawn: 6/23/2003 cg  
 Client: McCord Center Received in Lab: 6/24/2003 11:41:00AM SLR  
 Requisition No.: 4544246  
 Reason for Test: REasonable Cause

Test Name	Result	Units	Flag	Range/Cutoff
10 Panel by EIA A2 <span style="float: right;">Run By: DJS at 6/24/2003 12:45:00PM</span>				
Amphetamines	Negative			1000
Barbiturates	Negative			200
Benzodiazepines	Negative			200
Cocaine	Negative			100
Opiates	Negative			300
PCP	Negative			25
THC	Negative			25
Methadone	Negative			250
Propoxyphene	Negative			150
Ethanol	Negative			50
Nitrite	Negative			Negative
Chromate	Negative			Negative
Specific Gravity	1.019			1.003 - 1.035
Creatinine	91.2	mg/dL		20.0 - 400.0
pH	7.3			4.5 - 9.0

--- End Of Report ---

I hereby certify that I performed or had the above performed directly under my supervision as an employee of and within the laboratory facilities of Dominion Diagnostics LLC and that the above is a true and accurate record of the analysis.

OR

As an employee of NWSI I hereby certify that the above is a true and accurate record.

This information has been disclosed to you from records whose confidentiality is protected by Federal law. Federal regulations (45 CFR Part 2) prohibit you from making any further disclosure of it without the specific written consent of the person to whom it pertains or as otherwise permitted by such regulations. A general authorization for the release of medical or other information is not sufficient for this purpose.

# DOMINION DIAGNOSTICS

211 Circuit Drive  
 North Kingstown, RI 02852  
 Phone 401-667-0800 Fax 401-667-0220  
 Technical Services 401-667-0901

Name: Galloway, Ginger      Accession: 4189879  
 Patient Number: 250237991      Age: 42 years  
 Birth: 7/9/1960      Sex: F      Collected/Drawn: 5/30/2003      JT  
 Client: McCord Center      Received in Lab: 6/2/2003 10:26:00AM      EIA  
 Requisition No.: 4189879  
 Reason for Test: Treatment

Test Name	Result	Units	Flag	Range/Cutoff
<b>10 Panel by ELA A2</b>				
Amphetamines	Negative			1000
Barbiturates	Negative			200
Benzodiazepines	Negative			200
Cocaine	Negative			100
Opiates	Negative			300
PCP	Negative			25
THC	Negative			25
Methadone	Negative			250
Propoxyphene	Negative			150
Ethanol	Negative			50
Nitrite	Negative			
Chromate	Negative			Negative
Specific Gravity	1.006			Negative
Creatinine	35.4	mg/dL		1.003 - 1.035
pH	7.2			20.0 - 400.0
				4.5 - 9.0

*Run By: CMH at 6/2/2003 11:44:00AM*

--- End Of Report ---

I hereby certify that I performed or had the above performed directly under my supervision as an employee of and within the laboratory facilities of Dominion Diagnostics LLC and that the above is a true and accurate record of the analysis.

OR  
 As an employee of NWSI I hereby certify that the above is a true and accurate record.

RANDOM DRUG SCREENS, INC.

Drug Test Results

Date: 03-31-05

Random Drug Screens, Inc.

1345 Garner Lane, Suite 303A

PH: (803 772-0027)

NAME: GINGER GALLOWAY

SS: 250-23-7991

SLIP: 41276132

REF ID: PERSONAL

COLL SITE: Random Drug Screens, Inc.  
1345 Garner Lane, Suite 303A  
Columbia, S. C. 29210

COLL BRANCH: Random Drug Screens  
COLL PHONE: (803) 772-0027  
COLL FAX: (803) 772-0095

REASON FOR TESTING: PERSONAL

SAMPLE TYPE: DRUG SCREEN (5 PANEL)

DRUG SCREENING	STATUS	CUTOFF VALUES
COCAINE MEABOLITE	NEGATIVE	300 NG/ML
AMPHETAMINE/METHAMPHETAMINE	NEGATIVE	1000 NG/ML
MARIJUANA METABOLITE	NEGATIVE	300 NG/ML
PHENCYCLIDINE	NEGATIVE	25 NG/ML
OPIATES	NEGATIVE	300 NG/ML

TESTING METHODOLOGY: INSTANT RAPID TESTING

PAGE 1

( END OF REPORT)

TESTER: Kira Greatheart-MA-CPC

TESTING INSTITUTION: RANDOM DRUG SCREENS, INC.

TEST DATE: 03-31-05

RANDOM DRUG SCREENS, INC.

Drug Test Results

Date: 03-14-05

Random Drug Screens

1345 Garner Lane, Suite 303A

Columbia, S.C. 29210

PH: (803 772-0027

NAME: GINGER GALLOWAY

D.L. #: 004996346

Collected: 03/14/05

Completed:03/14/05

SLIP: V4109256

REF I.D: PERSONAL

COLL SITE: Random Drug Screens, Inc.

1345 Garner Lane, Suite 303A

Columbia, S. C. 29210

COLL BRANCH: Random Drug Screens

COLL PHONE: (803) 772-0027

COLL FAX: (803) 772-0095

SAMPLE TYPE:

REASON FOR TESTING: PERSONAL

DRUG SCREEN ( 2 PANEL)

DRUG SCREENING

STATUS

CUTOFF VALUES

COCAINE MEABOLITE

NEGATIVE

300 NG/ML

MARIJUANA METABOLITE

NEGATIVE

50 NG/ML

TESTING METHODOLOGY:

FIRST CHECK – WORLDWIDE MEDICAL  
CORPORATION

PAGE 1

( END OF REPORT)

TESTER: KIRA GREATHEART-CPC

TESTING INSTITUTION: RANDOM DRUG SCREENS, INC.

TEST DATE: 03/14/05

CLIENT NAME: Ginger Galloway  
DATE: 5/23/03 TIME: 10:15

### DAWN CENTER

Tri-County Commission on  
Alcohol and Drug Abuse  
P.O. Box 1166  
Orangeburg, S.C. 29116

Offices Located at:

Main Office  
910 Cook Road  
Orangeburg, S.C. 29118  
Telephone: (803) 536-4900  
Fax: (803) 531-8419

Michael C. Watson  
Treatment Facility  
P.O. Box 907  
2549 Main Highway  
Bamberg, S.C. 29003  
Telephone: (803) 245-4360

J.T. Blanton  
Treatment Facility  
Box 322  
2827 Old Belleville Road  
St. Matthews, S.C. 29135  
Telephone: (803) 655-7963

William J. McCord  
Adolescent Treatment Facility  
910 Cook Road  
Orangeburg, S.C. 29118  
Telephone: (803) 534-2328

Services:

- Education and Prevention Services
- Alcohol and Drug Safety Action Program
- Employee Assistance Program
- Offender Based Intervention Program
- School Intervention Program
- Outpatient Treatment
- Intensive Outpatient Treatment
- Residential Treatment
- Detoxification Treatment
- Adolescent Inpatient Treatment

### RESULTS OF URINE SCREEN

AMPHETAMINES	<u>Neg</u>
COCAINE	<u>Neg</u>
THC	<u>Neg</u>
MORPHINE	<u>Neg</u>
ALCOHOL	<u>Neg</u>
INTECT 7	
CREATININE	<u>100</u> NORMAL (20 - 100)
NITRATE	<u>0</u> NORMAL (0 - 10)
GLUTARALDEHYDE	<u>neg</u> NORMAL (NEGATIVE)
PH	<u>4.0</u> NORMAL (4.0 - 10.0)
SPECIFIC GRAVITY	<u>1.015</u> NORMAL (1.005 - 1.015)
BLEACH	<u>normal</u> NORMAL/ABNORMAL
PYRIDINIUM	<u>normal</u> NORMAL/ABNORMAL

TEST PERFORMED BY: M. Hutto

THIS INFORMATION HAS BEEN DISCLOSED TO YOU FROM RECORDS WHOSE CONFIDENTIALITY IS PROTECTED BY FEDERAL LAW. FEDERAL REGULATIONS (42 CRF PART 2) PROHIBIT YOU FROM MAKING ANY FURTHER DISCLOSURE OF IT WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS. A GENERAL AUTHORIZATION FOR THE RELEASE OF MEDICAL OR OTHER INFORMATION IS NOT SUFFICIENT FOR THIS PURPOSE.

Court/attorney

CLIENT NAME: Ginger Galloway

DATE: 3-6-03 TIME: 11:45

# DAWN CENTER

Tri-County Commission on Alcohol and Drug Abuse  
P.O. Box 1166  
Orangeburg, S.C. 29116

### Offices Located at:

Main Office  
910 Cook Road  
Orangeburg, S.C. 29118  
Telephone: (803) 536-4900  
Fax: (803) 531-8419

Michael C. Watson  
Treatment Facility  
P.O. Box 907  
2549 Main Highway  
Bamberg, S.C. 29003  
Telephone: (803) 245-4360

J.T. Blanton  
Treatment Facility  
P.O. Box 322  
2827 Old Belleville Road  
St. Matthews, S.C. 29135  
Telephone: (803) 655-7963

William J. McCord  
Adolescent Treatment Facility  
910 Cook Road  
Orangeburg, S.C. 29118  
Telephone: (803) 534-2328

### Services:

- Education and Prevention Services
- Alcohol and Drug Safety Action Program
- Employee Assistance Program
- Offender Based Intervention Program
- School Intervention Program
- Outpatient Treatment
- Intensive Outpatient Treatment
- Residential Treatment
- Detoxification Treatment
- Adolescent Inpatient Treatment

## RESULTS OF URINE SCREEN

AMPHETAMINES neg

COCAINE neg

THC neg

MORPHINE pos pt. on prescription medication

ALCOHOL neg

INTECT 7 PERCOCT, Lexapro, Valium, Provigil, Tylenol, Codeine

CREATININE 100  
NORMAL (20 - 100)

NITRATE 0  
NORMAL (0 - 10)

GLUTARALDEHYDE neg  
NORMAL (NEGATIVE)

PH 4.0  
NORMAL (4.5 - 10.0)

SPECIFIC GRAVITY 1.015  
NORMAL (1.005 - 1.015)

BLEACH Normal  
NORMAL/ABNORMAL

PYRIDINIUM Normal  
NORMAL/ABNORMAL

TEST PERFORMED BY: Judie Ginnard

THIS INFORMATION HAS BEEN DISCLOSED TO YOU FROM RECORDS WHOSE CONFIDENTIALITY IS PROTECTED BY FEDERAL LAW. FEDERAL REGULATIONS (42 CFR PART 2) PROHIBIT YOU FROM MAKING ANY FURTHER DISCLOSURE OF IT WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS. A GENERAL AUTHORIZATION FOR THE RELEASE OF MEDICAL OR OTHER INFORMATION IS NOT SUFFICIENT FOR THIS PURPOSE.

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

In the Matter of:

**GINGER L. GALLOWAY, R.N.**

License No. 39336

OIE #2003-136

Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice of Final Order Hearing, a copy of your litigating evidence, and a copy of Memorandum of Agreement and Stipulations** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Ms. Ginger Galloway  
116 Whispering Meadow Lane  
Irmo, SC 29063

SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING & REGULATION

*Krystal J McFadden*

Krystal J McFadden  
Administrative Assistant  
LLR-Office of General Counsel  
Post Office Box 11329  
Columbia SC 29211 1329

7008 1140 0000 7031 7751

U.S. Postal Service <sup>TM</sup>	
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For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
OFFICIAL USE	
Postage	\$ _____
Certified Fee	_____
Return Receipt Fee (Endorsement Required)	_____
Restricted Delivery Fee (Endorsement Required)	_____
Total	<b>Ms. Ginger L. Galloway</b>
Sent To	
Street or PO	_____
City, S	_____
PS Form 3800, August 2006	
See Reverse for Instructions	

2/19/10  
Postmark  
Here

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**STEPHAN C. DREW, L.P.N.**

License No. LPN.24872

OIE # 2008-571

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing will consider the Memorandum of Agreement in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 2:30 PM\*** in **Room 108**, Kingtree Building, 110 Centerview Drive, Columbia, South Carolina. The Memorandum of Agreement, together with the exhibits in evidence, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Memorandum of Agreement for the purpose of determining its action thereon.

FURTHER, Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and shall be subject to cross-examination regarding this matter. The Board may pose questions and request documents with regard to the complaint. Respondent and/or Respondent's counsel may present mitigating testimony and other evidence to the Board regarding an appropriate sanction in this matter. The Board will issue a Final Order based on the Agreement and on the information provided at the hearing.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
THE STATE BOARD OF NURSING**

  
\_\_\_\_\_  
Jocelyn T. Andino

Assistant General Counsel

LLR - Office of General Counsel

Post Office Box 11329

Columbia, SC 29211-1329

(803) 896-4581

Columbia, South Carolina

02 / 18 / 10

\*Hearing times are subject to change

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING

IN THE MATTER OF:

STEPHAN C. DREW, L.P.N.  
License No. LPN.24872

OIE # 2008-571

Respondent.

MEMORANDUM OF AGREEMENT  
AND STIPULATIONS

**WHEREAS**, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Stephan C. Drew, Licensed Practical Nurse; and

**WHEREAS**, Respondent, admitting the allegations, has advised that he wishes to waive formal hearing procedures and dispose of this matter pursuant to S.C. Code Ann. § 1-23-320(f) (1976, as amended), in lieu of, *inter alia*, a hearing before a hearing officer or panel appointed by the Board; and

**WHEREAS**, Respondent will participate in a Final Order Hearing pursuant to S.C. Code Ann. § 40-1-10 *et seq.* (1976, as amended) at such time as the Board shall require for the purpose of determining an appropriate sanction.

**THEREFORE, RESPONDENT STIPULATES AND ADMITS** to the following facts, along with the exhibits and other material referenced herein, to be considered by the Board in determining an appropriate sanction in connection with the disciplinary matter pending against Respondent:

1. That Respondent is a Licensed Practical Nurse duly licensed by the Board to practice in South Carolina, was so licensed at all times relevant to the matters asserted in this case, and is subject to the jurisdiction of the Board.
2. That on or about April 25, 2007, while employed at Thad E. Saleeby Development Center, in Hartsville, South Carolina, Respondent administered a heated milk & molasses enema to patient R.W., which was too hot and caused severe burning to patient R.W.'s rectal and buttocks area and required hospitalization. Respondent further admits that he heated the enema in the microwave and checked the temperature with his bare finger and not a thermometer, both of which were against policy. As a result, Respondent was terminated.

**RESPONDENT ADMITS** that the aforementioned acts of Respondent present grounds that constitute misconduct, as alleged.

**RESPONDENT AGREES** that at the Final Order Hearing Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and be subject to cross-examination regarding this matter and Respondent's practice. Respondent's answers may be considered by the Board in rendering its decision. Respondent may present mitigating testimony and other evidence to the Board regarding an **appropriate sanction** in this matter.

IN WITNESS WHEREOF, the parties hereto, having agreed to the matters related above, have executed this Memorandum of Agreement and Stipulations, to be effective the latter date appearing below.

AND IT IS SO AGREED.

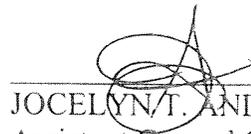
October 14, 2009

  
STEPHAN C. DREW, L.P.N.  
RESPONDENT

Oct. 14<sup>th</sup>, 2009

  
WITNESS or ATTORNEY

October 22, 2009

  
JOCELYN T. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
P.O. Box 11329  
Columbia, SC 29211-1329

SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING

In the Matter of:

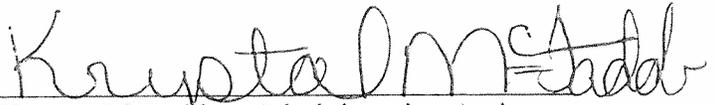
STEPHEN C. DREW, L.P.N.,  
License No. 24872

OIE 2008-571 Respondent.

CERTIFICATE OF SERVICE

I hereby certify that I have this day caused to be served the within **Notice of Final Order Hearing** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested and by regular first class mail, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Stephen C. Drew  
1333 Ruth Drive  
Darlington, SC 29540-8076

  
Krystal McFadden, Administrative Assistant  
LLR-Office of General Counsel  
Post Office Box 11329  
Columbia SC 29211 1329

7008 1140 0000 7031 7799

U.S. Postal Service™  
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Restricted Delivery Fee (Endorsement Required)		

Tot. **Mr. Stephan C. Drew**

Sent   
Street or PO  
City

2/19/10  
Postmark Here

PS Form 3800, August 2005 See Reverse for Instructions

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE STATE BOARD OF NURSING**

**IN THE MATTER OF:**

**MARTHA J. KIRBY, R.N.**  
License No. RN.17077

OIE # 2009-157

Respondent.

**NOTICE OF  
FINAL ORDER HEARING**

TO THE ABOVE-NAMED RESPONDENT:

YOU ARE HEREBY NOTIFIED that the State Board of Nursing will consider the Memorandum of Agreement in the above matter. **YOU ARE SCHEDULED TO APPEAR on March 25, 2010, at 3:00 PM\* in **Room 108**, Kingtree Building, 110 Centerview Drive, Columbia, South Carolina.** The Memorandum of Agreement, together with the exhibits in evidence, has been filed with the Administrator of the Board.

FURTHER, the Board will consider the Memorandum of Agreement for the purpose of determining its action thereon.

FURTHER, Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and shall be subject to cross-examination regarding this matter. The Board may pose questions and request documents with regard to the complaint. Respondent and/or Respondent's counsel may present mitigating testimony and other evidence to the Board regarding an appropriate sanction in this matter. The Board will issue a Final Order based on the Agreement and on the information provided at the hearing.

**SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING AND REGULATION  
THE STATE BOARD OF NURSING**

  
\_\_\_\_\_  
Jocelyn T. Andino  
Assistant General Counsel  
LLR - Office of General Counsel  
Post Office Box 11329  
Columbia, SC 29211-1329  
(803) 896-4581

Columbia, South Carolina

02/18/10

\*Hearing times are subject to change

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING & REGULATION  
BEFORE THE SOUTH CAROLINA BOARD OF NURSING**

**IN THE MATTER OF:**

**MARTHA J. KIRBY, R.N.**  
License No. RN.17077

OIE # 2009-157

Respondent.

**MEMORANDUM OF AGREEMENT  
AND STIPULATIONS**

**WHEREAS**, the South Carolina Board of Nursing (hereinafter “the Board”) has received an initial complaint with respect to Martha J. Kirby, Respondent; and

**WHEREAS**, Respondent, admitting the allegations as set forth below, has advised that she wishes to waive formal hearing procedures and dispose of this matter pursuant to S.C. Code Ann. § 1-23-320(f) (1976, as amended), in lieu of, *inter alia*, a hearing before a hearing officer or panel appointed by the Board; and

**WHEREAS**, Respondent will participate in a Final Order Hearing pursuant to S.C. Code Ann. § 40-1-10 *et seq.* (1976, as amended) at such time as the Board shall require for the purpose of determining an appropriate sanction.

**THEREFORE, RESPONDENT STIPULATES AND ADMITS** to the following facts, along with the exhibits and other material referenced herein, to be considered by the Board in determining an appropriate sanction in connection with the disciplinary matter pending against Respondent:

1. That Respondent is a Registered Nurse duly licensed by the Board to practice in South Carolina, was so licensed at all times relevant to the matters asserted in this case, and is subject to the jurisdiction of the Board.
2. That on or about March 1, 2009, while employed as a RN Supervisor at Inman Healthcare in Inman, S.C., Respondent failed to accurately document a change in Resident R.G.’s condition, highly suggestive of a stroke. Said Resident had a medical history consistent with high risk for stroke. Resident R.G. was later sent to the hospital where she was found to have had a stroke. As a result, Respondent’s employment was terminated.
3. Respondent contends that she assessed Resident at the time she was made aware of Resident’s change in condition, by checking Resident’s hand strength, pupils, and leg strength. In addition, Respondent contends that she reviewed Resident’s chart and prior history, which did not reveal any prior notes on Resident’s change in condition. Respondent also contends that she returned to observe Resident at two other times, and asked staff to monitor Resident, prior to deciding to contact the on-call physician,

who did not give orders to transport Resident to hospital but only ordered to have Resident monitored for increased signs of weakness and to run labs in the morning.

4. Respondent further contends that she reported Resident's change in condition to the oncoming nurse and contacted the resident's family to inform them of the resident's change in condition. In addition, Respondent contends that she attempted to make a late entry in Resident's chart the next morning, but the chart was not available in the facility.

**RESPONDENT ADMITS** that the aforementioned acts of Respondent present grounds that constitute misconduct. Respondent further admits that as a result of the previous admissions herein, Respondent has violated S.C. Code Ann. § 40-33-110(A)(16) and (18) (1976, as amended).

**RESPONDENT AGREES** that at the Final Order Hearing Respondent shall appear and, under oath, answer questions, if any, by members of the Board or its counsel, and be subject to cross-examination regarding this matter and Respondent's practice. Respondent's answers may be considered by the Board in rendering its decision. Respondent may present mitigating testimony and other evidence to the Board regarding an appropriate sanction in this matter.

**IN WITNESS WHEREOF**, the parties hereto, having agreed to the matters related above, have executed this Memorandum of Agreement and Stipulations, to be effective the latter date appearing below.

**AND IT IS SO AGREED.**

12-22, 2009

MARtha J. Kirby, R.N.  
**MARTHA J. KIRBY, R.N.**  
RESPONDENT

12-22, 2009

Pat Clayton, RN  
WITNESS or ATTORNEY

December 29, 2009

JOCELYN T. ANDINO  
JOCELYN T. ANDINO  
Assistant General Counsel  
S.C. Department of Labor, Licensing & Regulation  
P.O. Box 11329  
Columbia, SC 29211-1329

# CHARACTER REFERENCE LETTERS



200 Fortress Drive  
Inman, South Carolina 29349  
864-599-8600 • Fax: 864-599-8604

South Carolina State Board of Nursing  
Department of Labor, Licensing, & Regulation  
Post Office Box 11329  
Columbia, South Carolina 29211-1329

Re: Martha J. Kirby, R.N.  
License # RN.17077

To whom it may concern:

I am writing this letter of character reference for Martha Kirby, R.N.. This letter will be both on a personal and professional level. I have known Martha since March of 2004 when she came to work at Magnolia Manor, Inman. She was a charge nurse during this time. My relationship with Martha includes being her Assistant Director of Nursing and her Director of Nursing. During these years, Martha was an exemplary team member to the facility. I have seen her go above and beyond to help residents and their families. My mother was a resident for several months with Martha being assigned to be her charge nurse. I could not have asked for more compassionate, professional care. Her nursing care and documentation was always thorough and timely.

I left Magnolia Manor, Inman in 2008 and worked at Woodruff Manor as Assistant Director of Nursing for approximately six months. During that time, many of the employees at Woodruff would ask me if I knew Martha, as Martha had worked at Woodruff before coming to Magnolia Manor, Inman. The staff that inquired about her had only good comments about her work ethic and compassion. I then took a position at RoseCrest Retirement Community as the Director of Nursing of the skilled unit. Martha approached me about being hired for a position when she was terminated from Inman Health Care and Magnolia Manor (both Fundamental buildings that shared Martha). I did check references both personal and professional before offering Martha a position. This was done in part because of requirements prior to hiring, but also because I had not worked with Martha in a little over a year. The professional reference was of course, only hire

**A Continuing Care Retirement Community  
of the Lutheran Church**

date information, but the personal references from people that I knew personally all agreed that Martha was still a compassionate and professional nurse. It was also stated that she would be greatly missed. Martha started working for me at RoseCrest on March 25, 2009 once again as a charge nurse. She has been an excellent employee, has been here every day that she was scheduled. She is always on time. We have issued no corrective actions to Martha. We monitor our documentation closely and Martha's is accurate and timely. Martha's coworkers and myself are very blessed to have her as part of our team at RoseCrest.

If I can be of further assistance, please feel free to contact me.

Sincerely,

Pat Clayton, RN DON  
Pat Clayton, RN, DON

# Magnolia Manor of Inman

Carole Clark RN, DON  
Magnolia Manor Inman  
63 Blackstock Road  
Inman, SC 29349

To Whom It May Concern:

12/10/2009

I have worked with Martha Kirby closely since she first began working here in 2004. Martha worked at Magnolia Manor Inman as Shift Manager on 11-7. Martha always demonstrated a kind and caring attitude toward our residents. Martha had good assessment skills and was a very knowledgeable preceptor to the other nurses working nights. She was always willing to assist with any emergencies in order to precipitate the best outcome for our residents.

Martha had a wealth of knowledge and experience that she brought to our facility. She was always careful about checking orders and making sure that residents received the best care possible. Martha was always willing to assist with any extra jobs as needed by the nurse manager.

As a new DON, she gave me good feedback on expectations of the role and the survey process. Unfortunately for us, our company policy required that we terminate her since the incident that she was involved in took place at one of our facilities. This was disappointing to us as we lost a valued employee who got caught in an unfortunate situation.

If I can be of any further assistance, please let me know.

Sincerely,



Carole A. Clark RN, MSN  
Director of Nursing  
Magnolia Manor Inman

Date 12-9-2009

Annette Putman  
427 Rexford Dr.  
Moore, SC 29369

To Whom It May Concern:

I have known and worked with Martha J. Kirby for many years. She was my ADON at Woodruff Manor for over 15 years.

I found Martha to be very dependable, punctual and trustworthy. She established a good rapport with residents, families and co-workers. Her work ethics has been very professional, would work until assignments completed, willing to help others in anyway possible. Martha is devoted to her residents, families and co-workers.

In conclusion, Martha is an exceptional and experienced nurse. It is hard to fine someone with her loyalty and devotion to the nursing profession.

Sincerely,

A handwritten signature in cursive script that reads "Annette L. Putman". The signature is written in dark ink and is positioned above the printed name.

Annette Putman

12-10-2009

Sheila Calvert  
P.O. Box 454  
Wellford, S.C. 29385

To Whom It May Concern:

Martha and I have worked together at Woodruff Manor May 1995 up to March 2009 at Inman Healthcare. She has always been a devoted supervisor, and very professional in her duties.

She is very devoted in her career in teaching others especially new nurses concerning policies and procedures. Helping staff on floor in any way possible, making sure residents had what they needed. Her documentation would always be immaculate. She is kind, considerate, and always put others first.

I have never worked in the capacity with a Christian Nurse as devoted, compassionate and caring as she is.

Sincerely,

A handwritten signature in cursive script that reads "Sheila Calvert". The signature is written in black ink and is positioned above the printed name.

Sheila Calvert

Rosa L. Grant  
350 Bryant RD #D37  
Spartanburg SC 29303  
December 10, 2009

To whom it may concern.

I'm writing this letter in reference to Martha Kirby R.N. Mrs. Kirby has been a mentor to me for the past two years.

I've been employed as an LPN for the past sixteen years. Upon meeting nurse Kirby I've been inspired to continue my education and pursue a degree as a BSN

Nurse Kirby has supervised me for the past eighteen months. She has exemplified the true meaning of nursing. She is very competent, compassionate and caring. While observing her work ethics I realized that the human element has not been lost in health care.

Under Martha's Supervision she has exhibited great judgement and skill when it mattered most.

I whole heartedly trust and respect Mrs. Kirby RN and enjoyed not only being taught but embraced by this knowledgeable nurse.

Lisa Grant LPN  
Lisa Grant LPN

To Whom it may concern

12/9/59

I Diana ~~Quatt~~<sup>Quatt</sup> an LPN at Inman Health Care. I have worked with and have followed months Kirby on the on-coming shift. I have always found Mrs. Kirby to be an honest, conscience and professional in all her duties as a nurse. She has always, when I worked with her to put her patients (Residents) well being first.



2020-10-29.

I have worked with Martha for several years. I have always found her to be a competent, caring nurse and person.

I don't believe she would knowingly put any resident at risk.

I have worked as a Charge nurse, med. nurse and have worked as supervisor of long term care patients & concerns. Martha always worked with me in finding a correct answer to any problem or concern.

I really don't believe she was correctly inform of the incident that occurred on March 2

1600 Hill L.P.N.

14517 Sun View Dr

Lawrence - MO 64349

866-472-9218

cell 266-7206

Pam Ennis  
110 Peachtree Garden Ct.  
Berling Springs, SC  
(864) 518-4854 29316

To Whom it May Concern.

My name is Pam Ennis. I am a licensed Practical Nurse. I was a co-worker and am a friend of Martha Kirby. Martha is a dedicated and Professional Nurse, who would never be negligent in her duties and responsibilities to her residents. She is a very Caring individual with 40 plus years of experience without incident. She helped us learn our duties and responsibilities by passing on her knowledge and experience. Her contribution to the field of nursing is to be commended. I hope that you will take this into consideration when making your decision.

Sincerely  
Pam Ennis LPN

**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION  
BEFORE THE STATE BOARD OF NURSING**

In the Matter of:

**MARTHA J. KIRBY, R.N.**

License No. 17077

OIE #2009-157

Respondent.

**CERTIFICATE OF SERVICE**

I hereby certify that I have this day caused to be served the within **Notice of Final Order and copy Memorandum of Agreement and Stipulations** upon the person hereafter named, by placing the same in an envelope, securely wrapped, in the United States Mail, certified mail, return receipt requested, properly addressed to the said person hereafter named, at the place and address stated below, which is the last known address for the same:

Ms. Martha Kirby  
705 Conifer Circle  
Spartanburg, SC 29303-3314

SOUTH CAROLINA DEPARTMENT OF  
LABOR, LICENSING & REGULATION

*Krystal J McFadden*

Krystal J McFadden  
Administrative Assistant  
LLR-Office of General Counsel  
Post Office Box 11329  
Columbia SC 29211 1329

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City, State	[REDACTED]
PS Form 3800, August 2006	
See Reverse for Instructions	