

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

IN THE MATTER OF:

DEBBIE L. CARVER, R.N.
License No. RN.69082

OIE # 2008-457

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 26, 2010, at 8:30 AM* 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:
Debbie L. Carver, R.N.
License No. 69082

OIE No. 2008-457

Respondent.

DISCIPLINARY PANEL REPORT

This matter came before the Board's Disciplinary Panel of Nursing (the Panel) for hearing on November 9, 2009. The Notice and Complaint, and the Notice of Panel Hearing were sent to the Respondent via certified mail on or about September 24, 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 violating §40-33-110 (A)(4) 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 Registered 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 State presented evidence that on September 9, 2008, the North Carolina Board of Nursing permanently revoked the Respondent's license for failure to comply with the requirements of a prior consent agreement dated May 28, 2008.
3. The Respondent failed to provide proof of completing an on-line course on Professional Accountability and Legal Liability for Nurses within forty-five (45) days of signing the consent agreement.

4. The North Carolina Order of Revocation contained several sections giving notification to the Respondent that she could contest the revocation by showing compliance with the prior consent order.

5. 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 §40-33-110 (A)(4) of the South Carolina Code of Laws Ann. (1976, as amended) by having a license suspended or revoked in another state, in which case, the action by another state creates a rebuttable presumption that a South Carolina license may be acted upon in a similar manner. The Board may receive such evidence and rely solely on the findings in the record of the other state to make an administrative decision. There is no requirement for a *de novo* hearing on the facts.

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

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

That the Respondent receive a public reprimand.

The Respondent's license be revoked until such time that the Respondent can provide evidence to the Board that her license is in good standing with all the states in which she was licensed to practice as a nurse.

**SOUTH CAROLINA
DISCIPLINARY PANEL OF NURSING**

BY: Pamela Scaglione
Pamela Scaglione
Designated Panel Chairperson

CERTIFICATE OF SERVICE BY MAIL

This is to certify that the undersigned has this date served this Panel 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: 211 Carolina Rd. #1015 29745

Shirley Ann Scaglione
Designated Panel Chairperson

November 9th, 2009

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

In the Matter of:

DEBBIE L. CARVER, R.N.

License No. 69082

OIE #2008-457

Respondent.

CERTIFICATE OF SERVICE

I hereby certify that I have this day caused to be served the within **Notice of Final Hearing and a copy of the 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:

Debbie L. Carver
511 Cap Connolly Rd
York, SC 29745

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)	
)	
DEBBIE L. CARVER, R.N.)	
LICENSE NO. RN 69082)	
)	PANEL HEARING
)	
OIE # 2008-457)	
)	
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 12:20 p.m. on Monday, November 9, 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: Pamela Scaglione, RN, MN(Chair)
Wilma Rice, RN

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

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11 Service (3 pages)

12 State's 2: Notice, Formal Complaint, and Certificate

13 of Service (5 pages)

14 State's 3: Non-Published Consent Agreement (3 pages)

15 State's 4: Order to Revoke Privilege to Practice (5

16 pages)

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PROCEEDINGS

1
2 MS. SCAGLIONE: This is a hearing of the South
3 Carolina Department of Labor, Licensing and
4 Regulation Board of Nursing versus Debbie L.
5 Carver being held in Columbia, South Carolina
6 this 9th day of November 2009. The Complaint
7 and Notice of -- Notice of Hearing was served
8 by certified mail on September 24th, 2009.
9 All of the documents are in the Board's file
10 and made a part of the record. My name is
11 Pamela Scaglione and I am the designated
12 chairperson for this hearing. The other
13 member of the Nursing Board Panel hearing is
14 Wilma Rice. The attorney advising the Board
15 is Gwendolyn Green. The State is represented
16 by Jocelyn Andino, legal counsel for the South
17 Carolina Department of Labor, Licensing and
18 Regulation. This hearing will be conducted as
19 informally as is compatible with an equitable
20 presentation of both sides of the case and in
21 compliance with the provisions of the South
22 Carolina Administrative Procedures Act and the
23 Nursing Board Rules and Regulation. The State
24 and the Respondent may if they so desire make
25 opening statements. Thereafter, the State

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

12 OPENING REMARKS FOR THE STATE BY

13 MS. ANDINO: Okay. This is the matter of Debbie L.
14 Carver, a registered nurse with license number
15 69082 and case number 2008-457. We're here
16 today based on a complaint and investigation
17 which led to information -- belief that Ms.
18 Carver conducted herself in a way that
19 violates the Nurse Practice Act. The State is
20 alleging that on May 27, 2008, she signed a
21 Non-Published Consent Agreement with the North
22 Carolina Board of Nursing which she admitted
23 that on April 19th, 2008, while employed with
24 Belaire Healthcare in Gastonia, she abandoned
25 patients when she left work without counseling

1 medications, giving report, or giving the
2 medication cart keys to another nurse. The
3 terms of the Consent required, that she
4 complete an online Legal Liability for Nurses
5 course, and that needed to be completed within
6 45 days. And she needed to provide
7 documentation to the North Carolina Board of
8 that completion. Ms. Carver failed to provide
9 the required documentation to the Board, so on
10 September 9th, 2008, the North Carolina Board
11 of Nursing revoked her privilege to practice
12 in North Carolina. Therefore, the State would
13 show that Ms. Carver has violated section 40-
14 33-110 (A)(4) of the South Carolina Code of
15 Laws. Thank you. And at this time I'd like
16 to go ahead and enter into evidence as State's
17 Exhibit Number 1, the Notice of Hearing, the
18 Certificate of Service showing proper service
19 on September 24th, 2009.

20 (Whereupon, the Notice of Hearing and the
21 Certificate of Service, consisting of 3
22 pages, are marked as the State's Exhibit
23 Number 1 for identification).

24 MS. ANDINO: Do you need a copy of that Ms. Green?

25 MS. GREEN: Yes, please. Oh, wait a minute.

1 MS. ANDINO: Does the Panel need a copy of that?
2 As State's Exhibit Number 2, I'd like to enter
3 the Notice of Formal Complaint, the Formal
4 Complaint and Certificate of Service of that,
5 which was on August 6th, 2009.

6 (Whereupon, the Notice, the Formal
7 Complaint and the Certificate of Service,
8 consisting of 5 pages, are marked as the
9 State's Exhibit Number 2 for
10 identification).

11 MS. ANDINO: And the Panel has a copy of the
12 Complaint?

13 MS. SCAGLIONE: Yes.

14 MS. ANDINO: And then I'd like at this time to call
15 the State's only witness, Investigator Gwyn
16 Morris.

17 Whereupon,

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

21 EXAMINATION OF INVESTIGATOR MORRIS BY MS. ANDINO:

22 Q. Ms. Morris, please state your full name for the
23 record.

24 A. It's Jeannie Gwyn Morris.

25 Q. And where are you currently employed?

1 A. I'm with the Department of Labor, Licensing and
2 Regulation.

3 Q. And how long have you worked here at LLR?

4 A. Almost 18 years.

5 Q. Okay. And did you investigate a matter involving
6 Ms. Debbie Carver back in October of 2008?

7 A. I did.

8 Q. And was this investigation initiated pursuant to a
9 complaint?

10 A. Yes, it was.

11 Q. And briefly, what was the issue in that complaint?

12 A. That Ms. Carver had failed to live up to her
13 Consent Agreement with the North Carolina Board of
14 Nursing.

15 Q. Okay. And what information did you receive from
16 the North Carolina Board of Nursing regarding Ms.
17 Carver?

18 A. I got a copy of the Consent Agreement and a copy of
19 the privilege to revoke -- the revoke paperwork.

20 Q. And did you conduct any interviews in this matter?

21 A. Just with Debbie Mooney, the lady who actually --
22 she's our Complainant. She's the one who sent me
23 all the information.

24 Q. And where is she employed?

25 A. She's with North Carolina Nursing Board.

1 Q. Okay. And let me show you what I'm going to enter
2 as State's Exhibit Number 3.

3 (Whereupon, the Non-Published Consent
4 Agreement, consisting of 3 pages, is
5 marked as the State's Exhibit Number 3
6 for identification.)

7 Q. I'll give you a moment to look over it. And can
8 you identify this document for us, please?

9 A. Yes. This is the Non-Published Consent Agreement.

10 Q. And is it, isn't it correct that the North Carolina
11 Board of Nursing provided you with this document?

12 A. That's correct.

13 Q. And does this Agreement pertain to Ms. Carver?

14 A. It does.

15 Q. Did Ms. Carver sign the Agreement?

16 A. Yes. She did.

17 Q. And when did she sign this Agreement?

18 A. 5/28/08.

19 Q. By signing this Agreement, did Ms. Carver agree to
20 the stipulations of fact and conclusions of law?

21 A. Yes, she did.

22 Q. And is that Agreement outlined at number ten of the
23 Consent Agreement?

24 A. Yes, it does.

25 Q. And is that on page 2 of the Consent?

1 A. Yes.

2 Q. What allegations did Ms. Carver admit to by signing
3 this Agreement?

4 A. That while she was employed with Belaire Healthcare
5 Center in Gastonia, North Carolina, she abandoned
6 her patients and she left work without counting
7 medications, without giving report, and without
8 giving the keys to the medication cart to another
9 licensed individual.

10 Q. And where are those facts outlined in this Consent
11 Agreement?

12 A. Page 1 of number two.

13 Q. Okay. Did the Consent require Ms. Carver to
14 complete an online course on Professional
15 Accountability and Legal Liability for Nurses?

16 A. Yes, it did.

17 Q. And was she required to provide proof of completion
18 of that course within 45 days?

19 A. That's correct.

20 Q. And where in this Agreement is that mentioned?

21 A. Okay. Under number, number 14 under proposed
22 remedy.

23 Q. Okay. So the -- this Consent Agreement, the
24 State's Exhibit Number 3 is -- outlines the facts
25 that she has admitted to and the sanctions that she

1 agreed to. Correct?

2 A. That's correct.

3 Q. Let me show you what the State is going to enter as
4 Exhibit Number 4.

5 (Whereupon, the Order to Revoke Privilege
6 to Practice consisting of 5 pages, is
7 marked as the State's Exhibit Number 4
8 for identification.)

9 Q. I'll give you a moment to look over that. Can you
10 identify Exhibit Number 4, please?

11 A. Yes, ma'am. This is the Order to Revoke Privilege
12 to Practice.

13 Q. And isn't it correct that the North Carolina Board
14 of Nursing provided you with this document?

15 A. That's correct.

16 Q. And based on this exhibit, about when did the Board
17 send this information to the South Carolina Board
18 of Nursing?

19 A. September the 9th, 2008.

20 Q. And what is the date of the actual Order?

21 A. Let's see. Bear with me just a second. September
22 the 9th, 2008.

23 Q. So the Board sent the South Carolina Board
24 notification almost immediately after issuing this
25 order ---

1 A. Yes.

2 Q. --- is that correct?

3 A. Yes.

4 Q. And does this Order relate to Ms. Carver?

5 A. It does.

6 Q. Okay. And referring to the Order, referring to
7 paragraph, paragraph one of the Order, what action
8 did the Board take against Ms. Carver's license?

9 A. You said paragraph one of the Order?

10 Q. Yes. At the very top, uh-huh, of the Order.

11 A. Okay. That pursuant to the authority vested
12 Article 9A, Chapter 90 of the General Statutes of
13 North Carolina and Article 3A of Chapter 150B-38 of
14 the General Statutes of North Carolina, the North
15 Carolina Board of Nursing, hereafter referred to
16 as the Board, revokes the RN's Compact License as
17 granted through the Nurse Licensure Compact of
18 Debbie Childress Carver for the violation of the
19 terms of her Non-Published Consent Agreement.

20 Q. Okay. Does this Order mention any contact the
21 North Carolina Board attempted with Ms. Carver ---

22 A. Yes.

23 Q. --- prior to issuing this Order?

24 A. Prior to, yes. Let's see. Number 4, on August the
25 1st, 2008, Ms. Carver was sent a certified letter

1 and she was told that evidence of the successful
2 completion of the course had not been received and
3 that she had five business days from receipt of the
4 letter to submit evidence of successful completion
5 of the course. Ms. Carver signed for this letter
6 on August the 5th, 2008. Ms. Carver did not
7 respond to the letter, nor did she provide evidence
8 of successful completion of the course. Then on
9 August the 13th, 2008, Board staff talked with Ms.
10 Carver on the phone. Ms. Carver stated she sent in
11 the certificate showing successful completion of
12 the course with her signed Agreement and she did
13 not keep a copy. However, she was advised that the
14 Board did not receive the document and she would
15 need to take the course again and provide, provide
16 evidence of successful completion of the course.
17 Ms. Carver was given until August the 22nd, 2008,
18 to provide proof of successful completion of the
19 course. And then as of September the 4th, 2008,
20 there has been no further communication with Ms.
21 Carver.

22 Q. Okay. So after the contact that the Board was able
23 to make on August the 13th, 2008, there has been
24 no, no further -- per this Order there has been no
25 further contact with Ms. Carver. Is that correct?

1 A. Yes, ma'am. Per this Order.

2 Q. And per the Order, did the Board ever receive proof
3 that Ms. Carver completed the only requirement she
4 had under the Non-Published Consent Agreement?

5 A. No.

6 Q. And was Ms. Carver in this Order given notice of
7 her right to file an objection with the Board?

8 A. Yes, she was.

9 Q. And if you can just state what numbers in the Order
10 give that notice.

11 A. Number 12, number 14, and then again at the, on
12 page 3 at the bottom in bold.

13 Q. Okay. So did the Order state that if Ms. Carver
14 did not file the written objection that that would
15 mean that she was not contesting the matter and
16 that the Order as issued would stand?

17 A. That's correct.

18 Q. And where in the Order is that notice given?

19 A. Number 16 on page 3.

20 Q. Does number -- section, or number 14, excuse me, of
21 the Order state that her license would remain, or
22 her privilege to practice would remain revoked?

23 A. Yes, it does.

24 Q. Okay. Did we receive any information from the
25 North Carolina Board that Ms. Carver filed a

1 written objection to this Order?

2 A. No.

3 Q. And did you ever make contact with Ms. Carver?

4 A. No. I did not.

5 Q. Did you ever attempt to make contact with her?

6 A. Yes. I tried numerous telephone calls and e-mails.
7 And the telephone number was unreachable.

8 Q. And to this day, have you received any
9 documentation or any correspondence from Ms.
10 Carver?

11 A. No. I have not.

12 Q. Is this the only information you have relating to
13 this matter?

14 A. This is -- yes.

15 Q. I don't have any questions. Please answer any
16 questions of the Panel.

17 MS. SCAGLIONE: I don't have any questions.

18 CLOSING REMARKS FOR THE STATE BY

19 MS. ANDINO: So, in conclusion, the State would,
20 would submit that it has met its burden of
21 proof in that Ms. Carver did in fact violate
22 the section as alleged in the Complaint.

23 Thank you.

24 (Off the record discussions among Panel.)

25 MS. ANDINO: Do you need us to step outside while

1 you guys ...

2 MS. SCAGLIONE: Okay. We're just finishing filling
3 our sheet out.

4 MS. GREEN: You do need to go into executive
5 session.

6 MS. SCAGLIONE: Executive session, please.

7 MS. ANDINO: Okay.

8 (Executive session from 12:33 p.m. to 12:41 p.m.)

9 MS. SCAGLIONE: The State has proved Section 40-33-
10 110 (4) in that the Respondent's license is
11 revoked by North Carolina. Violations 40-33-
12 110 (4) dash (A), recommendation to revoke
13 license in South Carolina until she can show
14 compliance in North Carolina, with a public
15 reprimand.

16 (Whereupon, at 12:42 p.m., the proceeding
17 in the above-entitled matter was
18 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
Verbatim Court Reporter and Notary Public in and for the
5 State of South Carolina, took the foregoing hearing at 12:20
p.m. on Monday, November 9, 2009;
6

7 That the foregoing 16 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 16th day of November, 2009.
12
13

14 _____
Jennifer S. Angooraj
15 Notary Public for South Carolina
My commission expires March 14, 2017
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**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION
BEFORE THE STATE BOARD OF NURSING**

IN THE MATTER OF:

DEBBIE L. CARVER, R.N.
License No. RN.69082

OIE # 2008-457

Respondent.

NOTICE OF HEARING

To: Ms. Debbie L. Carver, Respondent

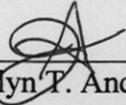
PLEASE TAKE NOTICE THAT:

1. The hearing in the above-captioned matter has been scheduled for **November 9, 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**

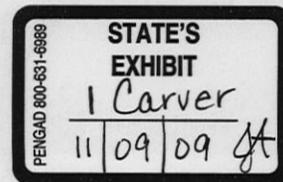


Jocelyn T. Andino
Assistant General Counsel
LLR - Office of General Counsel
Post Office Box 11329
Columbia, SC 29211-1329
(803) 896-4581

Columbia, South Carolina

09 / 16 / 09

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**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION
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DEBBIE L. CARVER, R.N.

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OIE #2008-457

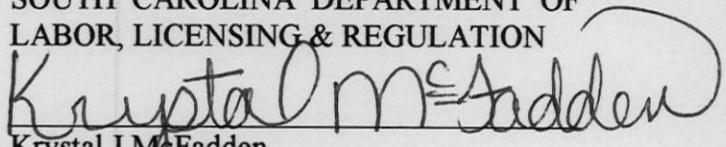
Respondent.

CERTIFICATE OF SERVICE

I hereby certify that I have this day caused to be served the within **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:

Debbie L. Carver
511 Cap Connolly Rd
York, SC 29745

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

September 22, 2009.

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1. Article Addressed to:

Ms. Debbie L. Carver



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Debbie L. Carver
 Agent
 Addressee

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9-24

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

NOH NURS
 2008-457

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7008 1140 0000 7039 7722

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

IN THE MATTER OF:

DEBBIE L. CARVER, R.N.
License No. RN.69082

OIE # 2008-457

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.

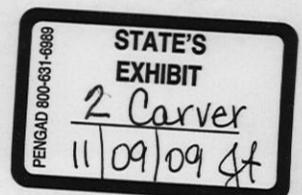
Failure to timely file your Answer in this matter may result in the allegations being admitted and a default judgment being rendered against you.

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

Joan K. Bainer MN RN NE BC

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

August 4th, 2009.



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

IN THE MATTER OF:

DEBBIE L. CARVER, R.N.
License No. RN.69082

OIE # 2008-457

Respondent.

FORMAL COMPLAINT

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 that on or about May 27, 2008, Respondent signed a Non-Published Consent Agreement with the North Carolina Board of Nursing, wherein she admitted that on April 19, 2008, while employed by Belaire Healthcare Center in Gastonia, N.C., she abandoned patients when she left work without counting medications, giving report, or giving the medication cart keys to another nurse. The terms of the Consent Agreement required that she complete an online course on Professional Accountability and Legal Liability for Nurses, within forty-five (45) days, and provide documentation to the N.C. Board of successful completion. Respondent failed to provide the required documentation to the N.C. Board.
- B. That on or about September 9, 2008, the North Carolina Board of Nursing revoked

Respondent's privilege to practice in North Carolina, due to Respondent's failure to comply with the terms of the non-published Consent Agreement dated May 27, 2008.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. § 40-33-110(A)(4) (1976, as amended), in the following particulars:

- A. Respondent has violated § 40-33-110(A)(4) (1976, as amended), in that she had a license to practice nursing in another state suspended or revoked or had other disciplinary action taken by another state, as evidenced by the North Carolina Board of Nursing's Order revoking Respondent's privilege to practice in North Carolina.

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).

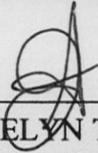
THEREFORE, the Board will consider these allegations and make such disposition as may be appropriate. You may respond and present evidence and argument on all issues involved. You may appear alone or with legal counsel.

SOUTH CAROLINA BOARD OF NURSING

08 / 103 / 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:

DEBBIE L. CARVER, R.N.
License No. 69082

OIE #2008-457

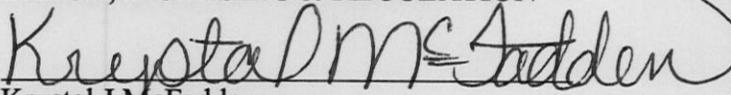
Respondent.

CERTIFICATE OF SERVICE

I hereby certify that I have this day caused to be served the within **Notice, Formal Complaint, and Consent 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:

Debbie L. Carver
511 Cap Connolly Rd
York, SC 29745

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

August 4, 2009.

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

0262 7006 2150 0002 3531 2320

Postage	\$	8/4/09 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total P

Sent To **Ms. Debbie L. Carver**

Street, A, or PO Box

City, State

PS Form 3800, August 2006

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. Debbie L. Carver

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Debbie L. Carver* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
 8-06

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:
 CA
 FC
 Notice 2008-457

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 2150 0002 3531 2320

In the matter of:)

Debbie Childress Carver) NON-PUBLISHED CONSENT AGREEMENT

SC Compact RN Certificate # 69082)

**BEFORE THE BOARD OF NURSING
OF THE STATE OF NORTH CAROLINA**

Pursuant to the authority vested by Article 9A, Chapter 90 of the General Statutes of North Carolina and Article 3A of Chapter 150B of the General Statutes of North Carolina, the North Carolina Board of Nursing (hereafter known as the Board), through the Complaint Review Committee, proposes to enter into a **CONSENT AGREEMENT** with Debbie Childress Carver, Registered Nurse.

STIPULATION OF FACTS

- (1) Debbie Childress Carver is the holder of South Carolina Compact RN Certificate # 69082, which expires on 04/30/2010.
- (2) Debbie Childress Carver was reported to the Board on May 7, 2008 as the result of a complaint that on April 19, 2008, while employed by Belaire Healthcare Center in Gastonia, North Carolina, she abandoned her patients when she left work without counting medications, without giving report and without giving the keys to the medication cart to another licensed individual.

CONCLUSIONS OF LAW/AUTHORITY TO PROCEED

- (3) The Board has the authority to take appropriate disciplinary or remedial action upon the privilege to practice in North Carolina upon finding of a violation of the Nursing Practice Act.
- (4) After careful consideration of all information received during the investigation, the information shows that a violation of the North Carolina Nursing Practice Act has occurred.
- (5) This stipulation shall be made part of the record and filed with the Board. In exchange for the licensee's acceptance of the terms of this Agreement, the Board will not prosecute the violations of the Nursing Practice Act by way of Administrative Hearings.
- (6) The Licensee has been advised of the right to seek legal counsel, to be represented by counsel in proceedings before the Board, and to be heard by the Board in a Settlement Committee meeting or an Administrative Hearing.
- (7) This Consent Agreement will be placed in the licensee's file, although this matter will not be published. The licensee is required to notify all current and future employers of the existence of this Consent Agreement and terms and conditions of this Consent Agreement until all conditions of the agreement are met.
- (8) This stipulation contains the entire agreement between the Licensee and the Board and all prior contemporaneous negotiations or oral negotiations are merged herein.

2008 JUN - 2 P 1:08

STATE BOARD OF NURSING

STATE'S
EXHIBIT
3 Carver
11/09/09

In the matter of:)

Debbie Childress Carver) NON-PUBLISHED CONSENT AGREEMENT

SC Compact RN Certificate # 69082)

- (9) The Licensee wishes to resolve this matter by CONSENT AGREEMENT and agrees the Board staff and legal counsel may discuss this CONSENT AGREEMENT with the Board *ex parte* whether or not the Board accepts this CONSENT AGREEMENT as written.
- (10) The Licensee expressly waives an Administrative Hearing and all further proceedings before the Board to which the licensee may be entitled by law and agrees to the Stipulation of Fact and Conclusions of Law.
- (11) This CONSENT AGREEMENT is made for the purposes of settlement of the case currently before the Board of Nursing only.
- (12) The Licensee expressly waives the right to seek judicial review or to otherwise challenge the validity of said CONSENT AGREEMENT.
- (13) Failure to return a signed copy of the proposed CONSENT AGREEMENT within ten (10) days will constitute refusal of the proposal; the offer will be voided, and the matter will be forwarded to the Sanction Review Committee for disciplinary action as indicated.

PROPOSED REMEDY

- (14) Based on the Stipulations of Fact and Conclusions of Law, without further notice of proceedings, the Board enters into the following CONSENT AGREEMENT with Debbie Childress Carver:

Debbie Childress Carver must successfully complete the North Carolina Board of Nursing's online Professional Accountability and Legal Liability for Nurses course and provide proof of successful completion to the Board office within 45 days of signing this agreement or the license will be suspended for failure to comply with the terms of this agreement.

- (15) If the privilege to practice in North Carolina is suspended for failure to comply with the terms of this agreement, the suspension becomes a public record under the North Carolina Public Record Statute B.S. Chapter 132 and Board policy.
- (16) The licensee assumes financial responsibility for any costs associated with fulfilling the terms of this CONSENT AGREEMENT.
- (17) In the event the Board determines the Licensee has violated any of the conditions of this AGREEMENT, and the Licensee disputes that such a violation of the conditions has occurred, then the Licensee agrees the Licensee must file such objection in writing with the Board WITHIN TEN (10) BUSINESS DAYS of the date of the notice of the violations to the Licensee. The notice to the Board shall contain with specificity the violations disputed.
- (18) When the Licensee has properly filed notice of objection with the Board, then the Licensee will be provided a Hearing before the Board at the next scheduled Board

In the matter of:)

Debbie Childress Carver) NON-PUBLISHED CONSENT AGREEMENT

SC Compact RN Certificate # 69082)

meeting for which appropriate notice can be provided, or scheduled by consent of the parties.

Privacy is respected; however, confidentiality is not assured. Privacy is maintained unless disclosure is requested or otherwise necessary to protect the health, safety and welfare of the public, or as ordered by a court of competent jurisdiction.

THE LICENSEE AGREES THAT IN ACCORDANCE WITH THE INTERSTATE COMPACT FOR NURSE LICENSURE, THE LICENSEE SHALL NOT PARTICIPATE IN ANY OTHER PARTY STATE UNTIL ALL CONDITIONS OF THIS CONSENT AGREEMENT ARE MET WITHOUT PRIOR AUTHORIZATION FROM THE NORTH CAROLINA BOARD OF NURSING AND THE OTHER PARTY STATE. THE LICENSEE MUST PROVIDE EVIDENCE OF SUCH AUTHORIZATION FROM THE OTHER PARTY STATE TO THE NORTH CAROLINA BOARD OF NURSING.

- (19) Having read the proposed CONSENT AGREEMENT, I now voluntarily enter into this AGREEMENT with the Board.

I accept 5/28/08 DC
DATE INITIAL

I decline _____
DATE INITIAL

the offer.

This the 27th day of May, 2008

Debbie Carver
LICENSEE

Linda Burkans
Linda Burkans, RN, PhD
Director, Education and Practice

Alexis B. Welch, RN, Ed.D
Chair
Ramona C. Whichello, BSN, MN
Vice-Chair
Julia L. George, RN, MSN, FRE
Executive Director

NC BOARD OF NURSING

P.O. Box 2129
Raleigh, North Carolina 27602
919.782.3211
FAX 919.781.9461
Nurse Aide II Registry 919.782.7499
www.ncbon.com

September 9, 2008

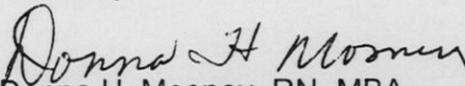
South Carolina State Board of Nursing
Mr. David Christian
PO Box 12367
Columbia, SC 29211

Dear Dave:

Enclosed please find a copy of an Order to Revoke Privilege to Practice for Debbie Childress Carver. Also enclosed are documents regarding Ms. Carver's case which will be helpful to you with your investigation.

If I can be of further assistance, please do not hesitate to contact me.

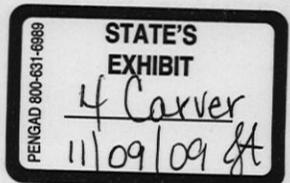
Sincerely,


Donna H. Mooney, RN, MBA
Manager, Discipline Proceedings
donna@ncbon.com
(919) 782-3211, ext. 285

DHM/msm

Enclosures

RECEIVED
2008 SEP 15 AM 10:15
OFFICE OF LICENSURE
AND COMPLIANCE



BEFORE THE NORTH CAROLINA BOARD OF NURSING
OF THE STATE OF NORTH CAROLINA

In the matter of)

Debbie Childress Carver, Registered Nurse) ORDER TO REVOKE PRIVILEGE TO PRACTICE

Certificate # 69082)

Pursuant to the authority vested article 9A, Chapter 90 of the General Statutes of North Carolina and Article 3A of Chapter 150B-38 of the General Statutes of North Carolina, the North Carolina Board of Nursing (hereafter referred to as the Board) **Revokes** the RN Compact License as granted through the Nurse Licensure Compact of Debbie Childress Carver for violation of the terms of her Non-Published Consent Agreement.

1. Debbie Carver Childress is the holder of South Carolina Registered Nurse Certificate # 69082 which was issued by the State of South Carolina and expires on April 30, 2010.
2. On June 2, 2008 Ms. Carver entered into a Non-Published Consent Agreement with the North Carolina Board of Nursing based on a report to the Board that was received on May 7, 2008 that alleged on April 19, 2008 while Ms. Carver was employed at Belaire Healthcare Center in Gastonia, North Carolina she abandoned her patients when she left work without counting medications, without giving report and without giving the keys to the medication cart to another licensed individual.

Ms. Carver agreed to successfully complete the North Carolina Board of Nursing online Professional Accountability and Legal Liability for Nurses course and provide proof of successful completion of the course to the Board office within 45 days of signing the agreement. The Board in return agreed that the Consent Agreement would remain non-published as long as Ms. Carver complied with the terms of the agreement.

3. Ms. Carver was given a deadline of July 17, 2008 to provide evidence to the Board of successful completion of the course. At the time of the deadline, evidence had not been received that Ms. Carver had successfully completed the course. On July 22, 2008 Board staff left a voice mail for Ms. Carver. Ms. Carver did not respond to this voice mail message.
4. On August 1, 2008 Ms. Carver was sent a certified letter and she was told that evidence of successful completion of the course had not been received and that she had 5 business days from receipt of the letter to submit evidence of successful completion of the course. Ms. Carver signed for this letter on August 5, 2008. Ms. Carver did not respond to the letter nor did she provide evidence of successful completion of the course.
5. On August 13, 2008 Board staff talked with Ms. Carver on the telephone. Ms. Carver stated she sent in the certificate showing successful completion of the course with her signed agreement and she did not keep a copy. However, she was advised that the Board did not receive the document and she would need to take the course again and provide evidence of successful completion of the course. Ms. Carver was given until August 22, 2008 to provide proof of successful completion of the course.

In the matter of)

Debbie Childress Carver, Registered Nurse) ORDER TO REVOKE PRIVILEGE TO PRACTICE

Certificate # 69082)

6. As of September 4, 2008, there has been no further communication with Ms. Carver; nor has she provided evidence of successful completion of the Board ordered course. By failing to provide evidence of successful completion of the course, Ms. Carver is in violation of the terms of her Consent Agreement.
7. The investigation determined the license has violated G.S. 90-171.37(6) (7) and (8) and 21 NCAC 36.0217 (c) (20).
8. Therefore, the privilege to practice as granted through the Nurse Licensure Compact for Debbie Childress Carver is hereby **Revoked**, and the licensee must immediately **Cease and Desist** from the practice of nursing in North Carolina.
9. In accordance with Chapter 150B of the General Statutes, the licensee is entitled to a "Show Cause" Hearing before a majority of the members of the Board to determine why the Board should not take further action because of the licensee's failure to comply with the probationary conditions, including imposing further discipline.
10. The licensee is entitled to be represented by counsel and to present evidence and witnesses/testimony on the licensee's behalf.
11. Pursuant to North Carolina General Statute Section 150B-40(d), the licensee may not communicate, directly or indirectly, with any individual member of the Board about this matter. If the licensee or legal representative has questions, they should contact Donna H. Mooney, RN, MBA, Manager for Discipline Proceedings.
12. If the licensee is disputing the fact that the violations as alleged did occur, the licensee must file a written objection with the Board within ten (10) working days of the date of the notice of violations to Debbie Childress Carver. The notice must contain with specificity the violations being disputed.
13. When the licensee has properly filed notice of objections with the Board, then the licensee will be notified of the exact date and time for the "Show Cause" Hearing. The Hearing will be held at the next scheduled Board meeting for which appropriate notice can be provided, or scheduled by consent of the parties.
14. Failure to return the written objection within the designated time period will be construed to mean the licensee is not contesting the matter and all further proceedings to which the licensee is otherwise entitled by law are hereby waived.

The license will then remain revoked until the licensee requests in writing the opportunity to appear before the Licensure Committee to petition for issuance of a license to practice in North Carolina.

15. This ORDER to REVOKE will be placed in the licensee's file and becomes a public record pursuant to the North Carolina Public Record Statute G.S. Chapter 132 and Board policy.

BEFORE THE NORTH CAROLINA BOARD OF NURSING
OF THE STATE OF NORTH CAROLINA

In the matter of)

Debbie Childress Carver, Registered Nurse) ORDER TO REVOKE PRIVILEGE TO PRACTICE

Certificate # 69082)

16. By not contesting the violations contained in this ORDER, the licensee is waiving the rights to a "Show Cause" Hearing, to challenge the validity of this ORDER and to any further proceedings to which the licensee may be entitled by law.
17. By contesting the violations contained in this ORDER, the licensee is requesting a "Show Cause" Hearing to be scheduled before a majority of the members of the Board.

The licensee understands that a written objection with the specific violations/charges being disputed must be received within 10 business days of the date of this notice.

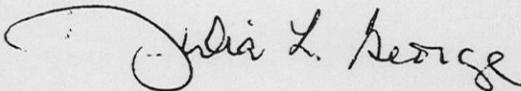
The subject of the "Show Cause" Hearing shall be limited to the specific reasons for which the probationary license was suspended/revoked.

When the licensee has properly filed notice of objection with the Board, then the Licensee will be provided a Hearing before the Board at the next scheduled Board meeting for which appropriate notice can be provided, or scheduled by consent of the parties.

18. In accordance with G.S. 90-171.27 (d) and Board policy derived therefrom, a fee may be assessed for disciplinary matters. A "Show Cause" Hearing is considered a discipline matter.

FAILURE TO RETURN THE ATTACHED PAGE WITHIN 10 BUSINESS DAYS WILL RESULT IN THE LICENSEE WAIVING ALL RIGHTS TO CHALLENGE THE VALIDITY OF THIS ORDER OR TO ANY OTHER PROCEEDINGS TO WHICH THE LICENSEE MAY OTHERWISE BE ENTITLED BY LAW.

This the 9th day of September, 2008



Julia L. George, RN, MSN, FRE
Executive Director
North Carolina Board of Nursing

BEFORE THE NORTH CAROLINA BOARD OF LICENSING
OF THE STATE OF NORTH CAROLINA

In the matter of _____)

Debbie Childress Carver, Registered Nurse) ORDER TO REVOKE PRIVILEGE TO PRACTICE

Certificate # 69082 _____)

Debbie Childress Carver

PLEASE RETURN THIS PAGE COMPLETED WITHIN 10 BUSINESS DAYS.

Initial the appropriate response, date and sign the document and return to Donna Mooney, RN, Manager/Discipline Proceedings

_____ I do not contest the information reported as violations of the NPA and I do not wish to have a "Show Cause" Hearing.

_____ I am requesting a "Show Cause" Hearing. Attached is my written objection with the specific violations/charges I am disputing.

The subject of the "Show Cause" Hearing shall be limited to the specific reasons for which the Temporary license was suspended/revoked.

LICENSEE'S NAME

DATE

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

IN THE MATTER OF:

JUANITA KIM ROWOTT, R.N.
License No. RN.61119

OIE # 2008-361

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 26, 2010, at 8:30 AM* 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:

Juanita Kim Rowott, R.N,
License No. 61119,

OIE No. 2008-361

Respondent.

DISCIPLINARY PANEL REPORT

This matter came before the Board's Disciplinary Panel of Nursing (the Panel) for hearing on November 9, 2009. The Notice and Complaint, and the Notice of Panel Hearing were sent to the Respondent via certified mail on or about August 21, 2009. A quorum of Panel members was present.

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 legal counsel. Jocelyn T. Andino, Assistant General Counsel, represented the State.

The State submitted the Respondent's written Answer to the Complaint dated September 4, 2009, into evidence.

The Respondent was charged with violations of § 40-33-110 (A) (18), and § 40-1-110 (f) of the South Carolina Code of Laws Ann. (1976, as amended).

The State made a motion to amend the Complaint in order to strike allegation (B) in the Complaint. The Motion was granted.

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 was a Registered 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 Respondent was employed at the Greenville Memorial Hospital in Greenville, South Carolina during the times relevant in this matter.
3. The State presented testimony that the Respondent was on duty from 7PM to 7AM on June 12, 2008. The Respondent documented on a newly admitted patient's record that she provided care to the patient approximately 2AM and 4AM during the shift.

According to the nurse tracking system, the Respondent did not enter the patient's room between 12:40 AM and 6:30 AM. A family member complained to staff members at the hospital regarding the lack of care and observation of the patient during the Respondent's shift.

4. The Respondent testified that while with another patient, a drink spilled and splashed on her top. The Respondent had to change the top and left the stained top in the room to dry for several hours. The locator badge was wet and left on the top.
5. The State presented testimony that when a badge is malfunctioning it sounds an alert to the central center at the hospital. The system retains information from the badge for an hour. After an hour, the system loses information for the badge and has to be reset. There is no evidence that the Respondent's badge was malfunctioning.
6. The Respondent was terminated by her employer on or about June 20, 2008.
7. 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 §40-33-110(A)(18) and §40-1-110(f) by failing to keep accurate records as required by law as evidenced by the documentation of care rendered for a patient when the nurse tracking system showed the Respondent was not in the patient's room. Such conduct is likely to cause harm to the public.
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

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

1. That the Respondent receive a private reprimand.

2. That the Respondent be required to take and complete a NCSBN course on Documentation within six (6) months of any final order issued by the Board.

**SOUTH CAROLINA
DISCIPLINARY PANEL OF NURSING**

BY: Pat Godbold
Pat Godbold
Panel Chairperson

January 6, 2009.

CERTIFICATE OF SERVICE BY MAIL

This is to certify that the undersigned has this date served this DNR in the above entitled action upon all parties to this cause by depositing a copy hereof in the United States mail, postage paid, on the Emergency Mail Service addressed to the party (ies) of the court (ies) to the following address: 315 Highland Ave Greenville SC 29617

This is 25 day of January 2009.
By Sheila M. Waters
[Signature]

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

In the Matter of:

JUANITA KIM ROWOTT, R.N.

License No. 61119

OIE #2008-361

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 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. Juanita K. Rowott
315 Highlawn Avenue
Greenville, SC 29617-2816

SOUTH CAROLINA DEPARTMENT OF
LABOR, LICENSING & REGULATION

Krystal J McFadden

Krystal J McFadden
Administrative Assistant
LLR-Office of General Counsel
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STATE OF SOUTH CAROLINA
DEPARTMENT OF LABOR, LICENSING AND REGULATION
BEFORE THE BOARD OF NURSING

IN THE MATTER OF)
)
JUANITA KIM ROWOTT, RN)
LICENSE NO. RN 61119)
) PANEL HEARING
)
OIE # 2008-361)
)
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 10:12 a.m. on Monday, November 9, 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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Panel Members: Pat Godbold, RN, BSN, MN (Chair)
Wilma Rice, RN
Pamela Scaglione, RN, MN

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

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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 Juanita Kim
5 Rowott being held in Columbia, South Carolina
6 this 9th day of November 2009. The Complaint
7 and Notice of Hearing was served by certified
8 mail on August 21st, 2009. All of the
9 documents are in the Board's file and made a
10 part of the record. My name is Pat Godbold
11 and I am the designated chairperson for this
12 hearing. The other members of the Nursing
13 Board Panel hearing on this case is Pam
14 Scaglione and Wilma Rice. The attorney
15 advising the Board is Gwendolyn Green. The
16 State is represented by Jocelyn T. Andino,
17 legal counsel for the South Carolina
18 Department of Labor, Licensing and Regulation.
19 This hearing will be conducted as informally
20 as is compatible with an equitable
21 presentation of both sides of the case and in
22 compliance with the provisions of the South
23 Carolina Administrative Procedures Act and the
24 Nursing Board Rules and Regulations. The
25 State and the Respondent may if they so desire

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

14 MS. ANDINO: Yes.

15 MS. GODBOLD: Please proceed.

16 OPENING REMARKS FOR THE STATE BY

17 MS. ANDINO: This is the matter of Juanita Kim
18 Rowott, a registered nurse with license number
19 61119 and OIE case number 2008-361. We're
20 here today based on a complaint that was
21 investigated and resulted in the State having
22 information and belief that Ms. Rowott has
23 engaged in conduct that violates the Nurse
24 Practice Act as well as the rules and
25 regulations of the Board. Specifically, as

1 you can see in the Formal Complaint, the State
2 has made two allegations. One being that
3 during Ms. Rowott's seven p.m. to seven a.m.
4 shift on June 12th, 2008, while working at
5 Greenville Hospital, she documented on the
6 newly-admitted patient whom we're going to
7 refer to as patient M.L., that she provided
8 care to that patient at approximately two and
9 four a.m. But the nurse call-tracking system
10 shows that she did not enter the patient's
11 room between 12:40 and 6:30 a.m. The State
12 previously had made a second allegation. At
13 this time, the State is going to ask that
14 second allegation to be stricken. So we're
15 going to strike allegation B and we'll only
16 proceed with the one allegation found in the
17 Formal Complaint. And as a ---

18 MS. GREEN: Madam Chairperson, go ahead and rule
19 whether you're going to allow her to strike.

20 MS. GODBOLD: That will be allowed to strike -- you
21 would be allowed to strike it.

22 MS. ANDINO: Okay. Thank you. And as a result of
23 those -- that allegation that the State has
24 made at this time, the State is contending
25 that Ms. Rowott has violated specifically

1 section 40-33-110 section (A)(18) and the
2 South Carolina Code of Laws section 40-110 --
3 excuse me -- 40-1-110 section (f) of the South
4 Carolina Code of Laws. Thank you.

5 MS. GODBOLD: Thank you.

6 MS. GREEN: So you're striking allegation, the
7 violation of (A)(8) -- (A)(18), I'm sorry.

8 MS. ANDINO: No.

9 MS. GREEN: So it's (A)(18) and (f)?

10 MS. ANDINO: Yes.

11 MS. GODBOLD: Would you like to make an opening
12 statement?

13 OPENING REMARKS BY THE RESPONDENT

14 MS. ROWOTT: Well, my name is Juanita Kim Rowott.
15 I worked for Greenville Hospital System almost
16 20 years. I started work with them in 1989.
17 I have always worked for them in a nursing
18 capacity. I documented on my patients each
19 time I saw them. There was a lot of trouble
20 with the tracking system as well as my badge.
21 And it is just a badge that is kind of clipped
22 on your clothes. The patient in 22, earlier
23 that night had stepped to the door -- she had
24 just arrived to the floor and I had greeted
25 her, spoke with her.

1 MS. GODBOLD: Ms. Rowott, you'll be able to
2 actually testify. What we need is just kind
3 of a brief summation of what you'll be talking
4 about or discussing.

5 MS. ROWOTT: Okay. Briefly, what I'm saying is the
6 tracking system has a lot of problems in it on
7 and off. The problem being with my scanning
8 badge is, earlier that night, I had to replace
9 the battery per request of the secretary.
10 This I did. Later something was spilled and I
11 no longer had a ---

12 MS. ANDINO: The State would object.

13 MS. ROWOTT: --- tracking on me to be able to do
14 that.

15 MS. ANDINO: She's testifying and it's just an
16 opening.

17 MS. GODBOLD: Sustained.

18 MS. ROWOTT: I'm sorry.

19 MS. GODBOLD: Yeah. We just need an, an opening
20 statement.

21 MS. ROWOTT: All right. My opening statement is I
22 have always abided by my nursing laws and the
23 Greenville Hospital System's protocol. I'm an
24 active nurse and I do not believe this is
25 true, so I cannot accept this.

1 MS. GODBOLD: Thank you. All right. Would you
2 like to begin?

3 MS. ANDINO: Yes. At this time I'd just go ahead
4 and put into evidence several exhibits with no
5 objection from Ms. Rowott. She's stipulated
6 to, to the exhibits. The first being the
7 Notice, the Formal Complaint, the Notice of
8 Hearing, as well as the Waiver of Attorney.
9 The first exhibit also documents proper
10 service.

11 (Whereupon, the Notice, the Formal
12 Complaint, the Notice of Hearing, the
13 Certificate of Service, and the Waiver of
14 Attorney, consisting of 7 pages, are
15 marked as the State's Exhibit Number 1
16 for identification).

17 MS. ANDINO: Does the Panel need copies?

18 MS. GODBOLD: I have a copy.

19 MS. SCAGLIONE: I have a copy.

20 MS. ANDINO: Okay.

21 MS. GREEN: I don't need a copy. I don't have a
22 copy of the Waiver. Do you have a copy of the
23 Waiver?

24 MS. ANDINO: Only that exhibit I've made the
25 record.

1 MS. GREEN: I'll get it later then.

2 MS. ANDINO: Okay. And as the State's Exhibit
3 Number 2, I'd like to enter Ms. Rowott's
4 response, her answer to the Complaint. Does
5 the Panel have a copy of that as well?

6 MS. GODBOLD: I do.

7 MS. ANDINO: Okay. Ms. Green, do you have a copy?

8 MS. GREEN: Yeah. I have it. I just never have a
9 copy of the waivers.

10 MS. ANDINO: Okay.

11 (Whereupon, Respondent's Response to
12 Formal Complaint, consisting of 9 pages,
13 is marked as the State's Exhibit Number 2
14 for identification).

15 MS. GODBOLD: And, Ms. Rowott, you have seen what
16 she has put into evidence and ...

17 MS. ROWOTT: Yes, ma'am.

18 MS. ANDINO: And at this time, as State's Exhibit
19 Number 3, a copy of the deposition taken
20 previously. Does the Panel have a copy of
21 this? No?

22 MS. GODBOLD: It might be a partial copy. We have
23 the page 2 through 14.

24 MS. ANDINO: I have 14 pages. But I, I mean, I
25 have extra copies that I can give to you.

1 MS. GODBOLD: I'll take a copy. Yes. I'll get a
2 copy.

3 MS. ANDINO: And that's State's Exhibit Number 3.
4 (Whereupon, the Deposition of Cynthia
5 Trout, consisting of 14 pages, is marked
6 as the State's Exhibit Number 3 for
7 identification).

8 MS. ANDINO: Do you have that Ms. Green?

9 MS. GREEN: Just give me one.

10 MS. ANDINO: Do you have one? You guys don't have
11 one?

12 MS. GREEN: This is your Exhibit 3, right?

13 MS. ANDINO: Yes. And I'll come back to this
14 exhibit. But at this time I'd like to go
15 ahead and call the State's first witness,
16 Investigator Maurice Smith, please.

17 Whereupon,

18 Investigator Maurice Smith (LLR) is duly sworn and
19 cautioned to speak the truth, the whole truth, and
20 nothing but the truth.

21 EXAMINATION OF MR. SMITH BY MS. ANDINO:

22 Q. Mr. Smith, can you please state your full name for
23 the record?

24 A. Maurice Elgin Smith.

25 Q. And where are you currently employed?

1 A. South Carolina Department of Labor, Licensing and
2 Regulations.

3 Q. And how long have you been employed here at LLR?

4 A. Three years.

5 Q. And about how many cases would you say you've
6 investigated while here at LLR?

7 A. Close to 600.

8 Q. And did you investigate a matter involving Ms.
9 Juanita Rowott back in July of last year?

10 A. Yes, I did.

11 Q. And was this investigation initiated pursuant to a
12 complaint?

13 A. Yes.

14 Q. And just very briefly what was the, the issue in
15 the complaint?

16 A. Just the synopsis: The Respondent performed
17 substandard patient care by falsifying patient
18 records, failing to check on two new patients
19 during full shift.

20 Q. And during the course of your investigation of that
21 complaint, what did you -- what information did you
22 obtain relating to this matter?

23 A. You of course did send a copy of the notification
24 of complaint to the Respondent, which she did
25 respond that she received. We have a copy of the

1 complaint. We have a copy -- witness statements
2 and of course the tracking, the nurse tracking
3 printout of, of the system.

4 Q. Did you also obtain patient records?

5 A. Yes.

6 Q. Okay. And you said you, you did interviews. What
7 kind of interviews did you conduct?

8 A. Telephone, telephonic.

9 Q. And whom did you interview? Do you recall?

10 A. Witnesses interviewed of course was the
11 complainant, Ms. Trout; the Respondent's immediate
12 supervisor, Ms. Sharon B. Wheeler.

13 Q. Okay. Let me show you what the State is going to
14 enter without objection as Exhibit Number 4, the
15 patient's record.

16 (Whereupon, the Patient Record of M.L.,
17 consisting of 2 pages, is marked as the
18 State's Exhibit Number 4 for
19 identification).

20 Q. Is that the record -- let me get you guys a copy of
21 this before I ask you. Ms. Rowott.

22 MS. ROWOTT: Thank you.

23 MS. GODBOLD: Thank you.

24 MS. ANDINO: Uh-huh.

25 MS. GODBOLD: Ms. Rowott, you have no objection to

1 this being entered?

2 MS. ROWOTT: No, ma'am. No objection. Thank you.

3 Q. Mr. Smith, are these the patient records you
4 reviewed during your investigation?

5 A. Yes, they are.

6 Q. And did you obtain a subpoena for these records?

7 A. Yes, I did.

8 Q. And does this record cover the time period you were
9 investigating?

10 A. Yes, ma'am.

11 Q. And what time period was that?

12 A. This was basically on June -- June 20th through
13 June the 13th, 2008 (sic). From approximately
14 2200, that's ten p.m. to 0200, two o'clock on the
15 a.m.

16 Q. And did you say June 20th through the 13th?

17 A. June 12th.

18 Q. 12th. 12th through the 13th, okay. And does this
19 record cover the patient in question?

20 A. Yes.

21 Q. And without stating the name, can you just state
22 the initials of the patient's name on this record?

23 A. M.R.L.

24 Q. Okay. Thank you. I'd like to go ahead and show
25 you what's going to be entered as State's Exhibit

1 Number 5. I'll give you an opportunity to review
2 it.

3 MS. GODBOLD: Any objection to the introduction of
4 this?

5 MS. ROWOTT: No, ma'am.

6 (Whereupon, the Nurse Call-Tracking
7 System Activity Report, consisting of 5
8 pages, is marked as the State's Exhibit
9 Number 5 for identification).

10 Q. Mr. Smith, did you also obtain this record during
11 your investigation?

12 A. Yes, I did.

13 Q. And is this a record of the nurse call-tracking
14 system?

15 A. Yes, ma'am.

16 Q. And does it cover the time period in question in
17 your investigation?

18 A. Yes, it does.

19 Q. And what is that time period?

20 A. Again June 12th, 2008 through June 13th, 2008.

21 Q. And to your knowledge, does it cover the patient in
22 question?

23 A. Yes.

24 Q. And can you tell me how you're able to determine
25 that it does cover the patient in question?

1 A. The ID locator badge is 13393, which is that of the
2 Respondent. The room number for the patient was
3 5322.

4 Q. And that room number 5322, is it referenced in this
5 exhibit that you have before you?

6 A. No, it's not.

7 Q. On none of the pages of the exhibit?

8 A. Correction. In the bottom of the first page, if
9 you look in the top left corner, it shows the room
10 number. And on the second page, both times it
11 shows the number 5323 (sic).

12 Q. So the room number referenced in page -- patient in
13 room number 5322, that's addressed in this record
14 that you have before you. Is that correct?

15 A. Correct.

16 Q. Okay. And you stated that the patient in question,
17 patient M.L., she was, per the records which are
18 Exhibit Number 4, she was in room 5322?

19 A. Correct.

20 Q. Okay. And did you ever contact Ms. Rowott during
21 your investigation?

22 A. Again, I sent her the Letter of Complaint on May
23 1st and around May 4th she followed up with a phone
24 call to me wanting to know more about the case.
25 Which then we reviewed the complaint and what her

1 option was -- what she needed to do.

2 Q. And at that time whenever you spoke with her, do
3 you recall if she admitted to any of the
4 allegations of wrongdoing?

5 A. She denied the allegations.

6 Q. Did you request that she provide a written
7 statement to address the allegations?

8 A. Yes. And I made her the offer to send her response
9 so it could be reported to the case folder.

10 Q. And did you receive a statement from her?

11 A. Yes, I did.

12 Q. Okay. And did that statement include any
13 admissions of misconduct?

14 A. No. It did not.

15 Q. Did you obtain any other information pertaining to
16 this incident?

17 A. No.

18 Q. Okay. I don't have any further questions. Please
19 answer any questions Ms. Rowott or the Panel may
20 have.

21 EXAMINATION OF MR. SMITH BY MS. ROWOTT:

22 Q. Where -- if I wasn't in the rooms or in the room
23 that I said I was at this particular time, where
24 did my badge say that I was?

25 A. I can't answer that question. All I know is that

1 you -- the tracking system was supposed to tell us
2 or tell the hospital when you entered and exited a
3 specific room.

4 Q. Yes, sir. But my question was, where does it say
5 that I actually was or my badge was if I wasn't in
6 that room?

7 A. It shows other rooms, 5321, on the first page.
8 There was time periods that you were in that room.
9 Does that answer your question?

10 Q. Yes, sir. Thank you.

11 MS. ROWOTT: Do I need to state the reason I wanted
12 to ask him that?

13 MS. GODBOLD: No, ma'am.

14 MS. ROWOTT: Thank you.

15 MS. GODBOLD: Any other questions for the witness?

16 MS. ROWOTT: No. Thank you.

17 EXAMINATION OF MR. SMITH BY THE PANEL:

18 MS. GODBOLD: Investigator, I might have
19 misunderstood. I thought you said that you
20 had contact with her in May and yet the
21 allegation was from June.

22 A. Previous year, 2008. I made contact with her May
23 of this year.

24 MS. GODBOLD: Okay. So it was ---

25 A. 2009.

1 MS. GODBOLD: --- May 2009. All right. Just for
2 my own clarification because I am not familiar
3 with this system, as you look at room 5321, it
4 would show that she was in the room at 12:26
5 as the, the last time that was, that was
6 highlighted and then goes back in the room at
7 2:30 a.m. Is that correct?

8 A. Yes, ma'am. Actually 2:31.

9 MS. GODBOLD: And was in the room at 3:17, 3:21,
10 4:21, 6:24. Is that correct?

11 A. I'm not sure if that's the entry and exit time.
12 What I was also relying on is, on the bottom of
13 each room number, it gives you the total number of
14 visits and the time that was spent total for the
15 day.

16 MS. GODBOLD: And then likewise on page 2, she was
17 in that room at 12:22, 12:39, 12:40, and then
18 again at six?

19 A. Yes, ma'am.

20 MS. GODBOLD: Do y'all have questions? If you'll
21 give us just a minute to look through the, the
22 information.

23 MS. SCAGLIONE: I have a question. Since we struck
24 B, are we only then questioning room 5322?

25 MS. ANDINO: Yes. That's correct.

1 MS. SCAGLIONE: Okay.

2 A. And again all these increments are in minutes.

3 MS. GODBOLD: Okay. So when we see time in the
4 room that's actually a minute?

5 A. Yes, ma'am.

6 MS. GODBOLD: Okay. Any further questions?

7 MS. SCAGLIONE: Yeah. Patient room 5322, this was
8 your new admission?

9 MS. ROWOTT: This was an admission that came before
10 I arrived on the floor, which was actually to
11 the day shift nurse. And she said she hadn't
12 had time to look at her. We were taking and
13 giving our report right outside the room.
14 Which the badge, the badge shows you in that
15 area even when you're not there.

16 MS. ANDINO: The State would object that she's
17 testifying.

18 MS. GODBOLD: Sustained. Do you have further
19 questions for the Investigator?

20 MS. SCAGLIONE: No.

21 MS. GODBOLD: Thank you.

22 MS. ANDINO: And the State would request that Mr.
23 Smith be excused at this time.

24 MS. GODBOLD: Yes.

25 MS. ANDINO: Thank you.

1 MS. GODBOLD: Thank you.

2 MS. ROWOTT: Thank you very much.

3 MR. SMITH: Yes, ma'am.

4 MS. ROWOTT: Thank you.

5 MS. ANDINO: Before the State calls its second
6 witness, I'd like to address what's been
7 entered as Exhibit Number 3, which is the
8 deposition ---

9 MS. GODBOLD: Okay.

10 MS. ANDINO: --- that was taken. This deposition
11 was taken on October 29th, 2009. The witness
12 was properly subpoenaed, but she was unable to
13 testify here today and that's why she was
14 deposed. If we can just briefly do a
15 summation of the testimony. If you can refer
16 to page 5.

17 MS. GREEN: Why was, why was she not here?

18 MS. ANDINO: She was going to be at a conference
19 out of state. It was a proper, proper,
20 dismissal. On page 5, you can see that Ms.
21 Trout -- and just to go back. This deposition
22 is the deposition of Cynthia Trout. Ms. Trout
23 did testify that she is the Director of
24 Nursing at Greenville Hospital and that she
25 works on the fifth floor, which is the

1 pulmonary unit. At page 5, you can see that
2 she testified that she was informed by Shannon
3 Wheeler, the nurse manager, of the incident
4 involving Ms. Rowott. And starting at line 15
5 she quotes by saying, well, Shannon Wheeler
6 brought all the information to me, all the
7 documents to me, and we sat down and reviewed
8 it together. And then I recommended that she
9 talk with HR about what had occurred and what
10 they recommended as far as actions with that
11 employee. Once she talked to ---

12 MS. GREEN: I'm, I'm sorry, Madam Chairman. You
13 said page 5 of the deposition?

14 MS. ANDINO: Page 7.

15 MS. GREEN: Page 7. Okay.

16 MS. ANDINO: At line, starting at line 15.

17 MS. GREEN: Okay.

18 MS. ANDINO: And continuing -- once she talked to
19 HR and we determined what we thought needed to
20 be done, then I spoke with my supervisor to
21 run that through her. And like I said, this
22 is just a summation of the transcript that you
23 guys have had an opportunity to review. Going
24 on to page 8, Ms. Trout testified that her
25 involvement in the investigation was

1 essentially reviewing the documents Ms.
2 Wheeler had gathered. She also testified that
3 she reviewed the patient's records as well as
4 the nurse call-tracking system records. On
5 page 9, you will see that Ms. Trout testified
6 that, to her knowledge, Ms. Rowott was given
7 an opportunity to provide an explanation and
8 support it by documentation and that Ms.
9 Rowott did not submit a statement. At the
10 bottom of page 9, you will see that she
11 testified that to her knowledge -- I'm sorry --
12 -- yeah. At the bottom of page 9 and going on
13 to page 10, you will see that she testified
14 that after consulting with the CNO and the
15 associate CNO, the decision was made to
16 terminate Ms. Rowott's employment. Ms. Trout
17 further testified that she did not meet with
18 Ms. Rowott, that she never contacted her as
19 that was not normal, the normal policy and
20 that she did not know Ms. Rowott personally.
21 At page 11, Ms. Trout testified that after
22 reviewing the documentation and the records
23 she determined that Ms. Rowott had falsely
24 documented the patient records. Specifically,
25 at line 21, Ms. Trout stated, quote, because

1 in the medical record, there was documentation
2 that she had provided direct care to the
3 patient and in -- on the call log, there was
4 no documentation that she had been in the room
5 at that particular time. She had gone from
6 around 12-midnight to around five a.m. and was
7 not shown as being logged into that room, end
8 quote. At page 12, Ms. Trout testified that
9 she found the nurse call-tracking system to be
10 an -- to be accurate in documenting if the
11 nurse is in the room giving care. She further
12 testified with relation to the nurse call-
13 tracking system that it was an automatic
14 sensor-type system. And you can see on line
15 24 of page 12, quote -- where she states,
16 quote, no, they wear a badge on their uniform
17 and the system automatically picks them up
18 when they walk into the room and then logs
19 them out when they come out of the room. And
20 that's a brief synopsis of the testimony that
21 Ms. Trout did give in this matter.

22 MS. GODBOLD: Thank you.

23 MS. ANDINO: And at this time I'd like to call the
24 State's second witness and final witness, Ms.
25 Shannon Wheeler. Can you get her, please?

1 MS. SCAGLIONE: Do you have a question you'd like
2 to ask?

3 MS. ROWOTT: Am I, am I allowed to ask one question
4 about this, please? My question is with --
5 it's on page 12, 14 A. In the deposition she
6 is also asked if there has been any problems
7 with these tracking systems. And she does
8 state they have on other floors, but on our
9 floor it's the same way.

10 MS. GODBOLD: Thank you.

11 MS. ROWOTT: Thank you.

12 MS. GODBOLD: Hi there. You'll be sworn in.

13 Whereupon,

14 Shannon Wheeler is duly sworn and cautioned to
15 speak the truth, the whole truth, and nothing but
16 the truth.

17 EXAMINATION OF MS. WHEELER BY MS. ANDINO:

18 Q. Good morning, Ms. Wheeler.

19 A. Hello.

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

21 A. Shannon Bryant Wheeler.

22 Q. And where are you currently employed?

23 A. Greenville Memorial Hospital.

24 Q. And what are your duties there at Greenville?

25 A. I'm the Nurse Manager of 5-C Pulmonary Medicine.

1 Q. And how long have you been there?

2 A. I have been with the hospital system since 1985.
3 And I have been a nurse manager on that unit for
4 about the past eight years.

5 Q. And are you a registered nurse?

6 A. Yes.

7 Q. And how were you made aware of the incident
8 relating to Ms. Juanita Rowott back in June of
9 2008?

10 A. A patient complaint. I had a patient complaint
11 that came through the -- there's a system from the
12 hospital if a family wants to call a service
13 excellence.

14 Q. Uh-huh.

15 A. And then I get an e-mail from that. And then, and
16 then the day shift nurses following had sent me an
17 e-mail for me to look into it.

18 Q. Regarding a particular patient?

19 A. A complaint, yes.

20 Q. And without stating that patient's name, can you
21 give the initials of the complaint for that
22 patient? Do you recall?

23 A. This is M.L. But the complaint -- it was patient
24 5323 that had ---

25 MS. GOBOLD: Excuse me. Is that the one that

1 we're not hearing on today?

2 MS. ANDINO: Yes. I was just going to say that.

3 A. I mean that -- this is what, this is the original
4 complaint that had led me to pull everything.

5 Q. Okay.

6 A. For this room and ---

7 Q. And when did you find out about this incident that
8 we're addressing here today?

9 A. On, let's see. It happened over the weekend, so I
10 found out about it on 6, 6/12 through 6, 6/12, 6/13
11 -- I found out about it on that following Tuesday.
12 I pulled it on June 18th is when I pulled the
13 records.

14 Q. Okay. So at around, approximately June 18th you
15 found out about this incident?

16 A. Uh-huh.

17 Q. Is that correct? From what time period was the
18 allegation that care was not provided?

19 A. Seven P to seven A -- from coming in at seven p.m.
20 on June 12th and leaving at seven a.m. on June
21 13th, 2008.

22 Q. And is it procedure for you to be informed directly
23 of these occurrences?

24 A. Yes.

25 Q. And were you Ms. Rowott's supervisor?

1 A. Yes.

2 Q. And what shifts did Ms. Rowott work?

3 A. Seven P to seven A.

4 Q. And was she scheduled to work the night of June
5 12th, 2008?

6 A. Yes, she was.

7 Q. And were you working that same shift?

8 A. No. I was not.

9 Q. What shifts do you work?

10 A. Seven A to three or seven to five.

11 Q. Okay. So day shifts?

12 A. Yes.

13 Q. What actions did you take with regards to
14 allegations against Ms. Rowott?

15 A. I pulled the detailed staff activity report.

16 Q. Uh-huh.

17 A. And I also talked to the family member that had
18 originally made, made the complaint. And then
19 after I pulled all of this, looked at the -- pulled
20 her documentation for the shift and then reviewed
21 with my director and HR and then met with Kim that,
22 her following next week that she worked.

23 Q. Okay. And did you, did you review patients'
24 records?

25 A. Uh-huh.

1 Q. Was that your previous testimony?

2 A. Uh-huh.

3 Q. And let me refer you to -- well, actually we're
4 going to be using what's already been marked as the
5 State's exhibits. So we'll refer to these two.
6 Just this State's Exhibit -- is it 4, the patient's
7 records?

8 MS. GODBOLD: Yes.

9 Q. Yes. Okay. So we'll -- if you can refer to this.

10 A. Okay.

11 Q. Patient four, I mean, I'm sorry. Excuse -- Exhibit
12 4, which are patient records. Is that the records
13 you were able to, to review during your
14 investigation?

15 A. It was.

16 Q. Is this the record for patient M.L.?

17 A. It is.

18 Q. Is this record for the time period of June 12th
19 through June -- for June 12th and 13th of 2008?

20 A. It is.

21 Q. And does this patient record include a room number
22 for the patient?

23 A. It does.

24 Q. And what is that room number?

25 A. 5322.

1 Q. Are room numbers used in other records such as
2 nurse call-tracking ---

3 A. Uh-huh.

4 Q. --- records to identify patients?

5 A. It is.

6 Q. And was Ms. Rowott assigned to this patient?

7 A. She was.

8 Q. Does the record include any notes made by Ms.
9 Rowott?

10 A. It does.

11 Q. If you can refer to the top of the first page of
12 this record, you'll see that the notes state,
13 patient observed, resting quietly ---

14 A. Uh-huh.

15 Q. --- with a date of June 13th, 2008. Were any of
16 those notes made by Ms. Rowott?

17 A. They were.

18 Q. And how can you tell?

19 A. Her user ID is NURJKR.

20 Q. And is that evident on the record?

21 A. It is.

22 Q. Okay. And at what times were the notes made for
23 June 13th, 2008?

24 A. Two a.m. -- midnight, two a.m. and then on the 12th
25 at 11 p.m.

1 Q. And any further notes on June 13th on the second
2 page?

3 A. Four a.m. and two a.m.

4 Q. Four a.m. and two a.m.?

5 A. Uh-huh.

6 Q. Any other time frames for June 13th? As -- I'm
7 sorry -- relating to where she notated that patient
8 was observed and resting quietly?

9 A. Six a.m.

10 Q. Six a.m. Okay. And still referring to that second
11 page, what type of care did Ms. Rowott document
12 that she provided to this patient at two a.m. and
13 four a.m.?

14 A. That she assisted with oral care, perineal care was
15 completed and she turned on the right side.

16 Q. Okay. And as far as you can see from, from this
17 record, which is two pages, are those pretty much
18 the notes that she made for the June 13th -- early
19 mornings of June 13th, 2008?

20 A. Yes.

21 Q. And you have there in front of you what's State's
22 Exhibit Number 5. Does the unit use a nurse
23 tracking system?

24 A. We do.

25 Q. And is that system used for all staff?

1 A. It is.

2 Q. And is the system used in all patient rooms?

3 A. It is.

4 Q. On the nurse tracking records, are the patients
5 identified by name or room number?

6 A. This one is identified by room, room number.

7 Q. And did you review that nurse call-tracking record
8 relating to this investigation?

9 A. I did.

10 Q. And per that record, how many patients were
11 assigned to Ms. Rowott on that shift?

12 A. Five -- let's see. 21, 22, 23, 24, 25 -- five.

13 Q. And are those from room numbers 5321 to 5325?

14 A. They are.

15 Q. To develop this record, does each nurse carry an ID
16 badge used to log activity for that nurse?

17 A. Uh-huh. We do.

18 Q. Yes? Okay. Does the ID badge need to be scanned
19 on anything to record activity by the nurse?

20 A. No. It's an infrared. Has sensors in the room.

21 Q. Okay.

22 A. So it picks it up.

23 Q. So the badge itself has sensors?

24 A. Uh-huh.

25 Q. And ---

1 A. And in the patients' rooms and the hallways.

2 Q. So there's also sensors in the hall and the patient
3 room, okay. So the ID badge is programmed to
4 automatically detect when a nurse enters or leaves
5 the room?

6 A. Uh-huh. It is.

7 Q. Does the nurse have to do anything to activate the
8 badge?

9 A. No. If the battery is starting to run low, the
10 badge itself will have a flash, a red light flash.
11 And it alerts the nurse to change the battery.

12 Q. Okay. So as long as the nurse wears the badge, her
13 activity in a patient's room will be logged by the
14 system?

15 A. It will.

16 Q. And you said that the ID works on batteries. Is
17 that correct?

18 A. It is.

19 Q. And you previously testified that if the battery is
20 low, a red light will flash ---

21 A. It will.

22 Q. --- to let them know that the battery is low?

23 A. It will.

24 Q. And does the nurse have access to other batteries
25 on the unit to keep the badge working?

1 A. We do.

2 Q. And are those batteries readily available on the
3 units?

4 A. Yes. We've got a par level going now. When we
5 first started the tracking system, we'd kind of run
6 out of batteries and have to get some batteries in.
7 But we have fixed that problem.

8 Q. Do you know if during this time frame, back in June
9 of 2008, was, was that an issue at that time?

10 A. I can't recall.

11 Q. Okay. Can other staff members determine if a
12 nurse's badge is not working?

13 A. Yes. They can by the screen at the main call
14 system. If -- you will show up at the main desk
15 about where you are. And if they know someone's
16 working and they need to get in touch with someone
17 but they're not showing up, then basically what
18 they'll do -- they overhead call the nurse, find
19 out where they are and let them know that the badge
20 is not working, to please change your batteries.

21 Q. Okay. And you said that this is a, a computer at
22 the main desk?

23 A. Uh-huh.

24 Q. And is it open, available for the nurses to see?

25 A. It is.

1 Q. Okay. To your knowledge, has this system in the
2 past failed to log that a nurse entered a room when
3 in fact she had entered a room?

4 A. The only time has been when they would not wear the
5 badge up where they're supposed to. One nurse was
6 wearing it way down on a pocket ---

7 Q. Uh-huh.

8 A. --- and the way she was checking on her patient --
9 this way -- with the badge pointing this way, it
10 was not picking her up. But she was also not
11 walking into the room.

12 Q. Okay. Has the system had any technical failures in
13 the past that you're aware of?

14 A. The system itself will, will like hang up every now
15 and then, but everyone knows it because it emits a
16 shrill sound. Maintenance comes up and they'll
17 have it fixed within, I mean, within just an hour
18 or so. It just is a matter of just resetting it.
19 And it does not lose data ---

20 Q. Uh-huh.

21 A. --- unless they pull the whole system down for a
22 major upgrade. And then you'll lose the data you
23 had before. So you wouldn't be able to go back
24 past the time they set it at.

25 Q. And if this were to occur, you said that the, the

1 machine, the system itself makes a noise?

2 A. Uh-huh.

3 Q. And that, I'm assuming, is that a loud noise?

4 A. Yes.

5 Q. Okay. So it's not something -- well, it is
6 something evident that everyone would be able to
7 know ---

8 A. Yes.

9 Q. --- that the system is down. Okay. And looking at
10 that chart on Exhibit Number 5, how are you able to
11 track Ms. Rowott's activity for, for each patient?
12 Just by looking at this how, how do you know?

13 A. Her badge ID number was assigned to her. And we
14 assign that in the system under her name.

15 Q. And what is Ms. Rowott's ID number?

16 A. 13393.

17 Q. And this record tells you the time the nurse enters
18 the patient's room?

19 A. It does.

20 Q. And it tells you how long the nurse is in the room?

21 A. It does.

22 Q. And how can you verify that ID number 13393 was
23 assigned to Ms. Rowott?

24 A. Kim was here when we first brought up the system.
25 And so I had a paper copy as we were getting all

1 the nurses up on it, of the badges assigned because
2 we have to manually put them in the system.

3 Q. And that list, did that list have the ID number of
4 all the nurses working the unit?

5 A. It did.

6 Q. Let me show you -- I'd like to go ahead and enter
7 as State's Exhibit Number 6 and ask you if this is
8 the list that you're referring to?

9 (Whereupon, the List of Nursing ID Badge
10 Numbers, consisting of 1 page, is marked
11 as the State's Exhibit Number 6 for
12 identification).

13 A. It is.

14 MS. GODBOLD: Ms. Rowott, do you have any
15 objections to this being admitted into
16 evidence?

17 MS. ROWOTT: How long has this -- may I ask how
18 long this system was in effect?

19 MS. GODBOLD: I just need to know ---

20 MS. ROWOTT: No.

21 MS. GODBOLD: --- if you have an objection.

22 MS. ROWOTT: No objection. Thank you.

23 Q. Okay. Is this the list, Ms. Wheeler, that you
24 developed and maintained?

25 A. For the initial setup. I never -- I do not

1 maintain this anymore because it's, it's manually
2 in the computer system now that we got it set up.
3 And as we get new employees in, they're put into
4 the system. And there's a screen I can go to there
5 to find out what nurse is assigned what badge
6 number.

7 Q. And for, for the time period of 2008, would this
8 have been the list that you were refer -- that you
9 would refer to as far as ID numbers?

10 A. Just for the nurses that were still working at the
11 time. It was an easy quick fix instead of going
12 into the computer and making sure. But also, you
13 can also go into the computer and double check that
14 the nurse didn't change -- hadn't changed badges.
15 Because if she did, they would have to have changed
16 her name with the badge.

17 Q. Okay. And per this record, was Ms. Rowott's
18 assigned badge number 13393?

19 A. It was.

20 Q. Okay. If you can go back to State's Exhibit Number
21 5, the, the nurse tracking record.

22 A. Uh-huh.

23 Q. You previously stated that patient M.L. was in room
24 5322. Is that correct?

25 A. It is.

1 Q. And the nurse tracking record for that patient
2 starts on the bottom of the first page and goes
3 into the second page. Is that correct?

4 A. It does.

5 Q. And per the tracking record, at what times did Ms.
6 Rowott enter room 5322 on June 13th, 2008?

7 A. 12:22 a.m., 12:39 a.m., 12:40 a.m., six a.m. --
8 6:31 a.m.

9 Q. Is there a policy on how often patients should be
10 checked on?

11 A. At night every two hours.

12 Q. Every two hours?

13 A. Uh-huh.

14 Q. And based on this record, did Ms. Rowott go more
15 than two hours without entering this patient's
16 room?

17 A. Yes.

18 Q. So based on this record, she went from 12:40 to
19 6:30 without entering this patient's room?

20 A. Yes.

21 Q. Okay. Going back to Exhibit Number 4, the
22 patient's record. Was it your previous testimony
23 that Ms. Rowott documented that she checked on this
24 patient at two a.m. and four a.m.?

25 A. Yes.

1 Q. And could Ms. Rowott provide this type of care, the
2 care that she documented she provided, to this
3 patient without entering the patient's room?

4 A. No.

5 Q. Okay. Based on the call-tracking record, do any of
6 the other patients' logs show that Ms. Rowott
7 entered their rooms between 12 and six a.m.?

8 A. Uh-huh. 5321 at two a.m., three a.m., four a.m.;
9 5323, five a.m.; 5324, three a.m. --, well 3:23
10 a.m. and 5:11 a.m. and 5:22 and 5:50, and 5:52.
11 525 -- 5325, at 3:27 and 3:31 and 5:22, 5:23 a.m.

12 Q. Okay. So this tracking record shows activity --
13 well, based on this record, it shows activity that
14 Ms. Rowott had between 12 a.m. and 6 a.m. in other
15 rooms. Is that correct?

16 A. Right. Uh-huh.

17 Q. After reviewing all of the documents, what did you
18 determine with regards to this incident?

19 A. That, that I needed to speak to Kim and kind of
20 find out -- to let her know what we have -- about
21 the complaint and our investigation and what it
22 showed. And that it showed that she was
23 documenting her giving care in rooms where the
24 badge system did not register as being in the room
25 at that -- those times.

1 Q. And were you responsible for determining what
2 action needed to be taken in this matter?

3 A. I meet with our director and Human Resources and we
4 look at past -- what's -- where's the employee in
5 past disciplinary actions, to be what is the next
6 step. And Kim's next step was for termination.

7 Q. And so that was the conclusion that you, that you
8 along with other personnel reached?

9 A. Right.

10 Q. Okay. And did you report this matter to any other
11 personnel? You previously stated HR. Were there
12 any other supervisors that you reported to?

13 A. Our director of nursing.

14 Q. And who was that?

15 A. Cynthia Trout.

16 Q. And did you speak to Ms. Rowott about this
17 incident?

18 A. I did.

19 Q. And when did you speak with her?

20 A. On 6/20/08. That was the morning -- she had been
21 off some time after this occurrence. So that was
22 her next time into work. And that gave me enough
23 time, about a week, to pull everything together and
24 talk to her.

25 Q. So you spoke to her in person?

1 A. I did.

2 Q. And so when you spoke to her on the 20th of June,
3 that was after your investigation was complete?

4 A. Uh-huh.

5 Q. Okay. Did you explain the allegations to her at
6 that point?

7 A. I did.

8 Q. And did she have an opportunity to review, review
9 any of the documents that you used during your
10 investigation?

11 A. She did.

12 Q. And at that time did she deny any of the
13 allegations?

14 A. She didn't deny. She just said that -- let's see.
15 Showed Kim the documentation of where she
16 documented care on two patients, but the nurse
17 call-system showed she was not in the room between
18 midnight and five a.m. Kim did not argue the
19 point.

20 Q. You stated that she worked, obviously that shift
21 June 13th. Did she work any other periods during
22 your investigation.

23 A. No. Huh-uh.

24 Q. When was the next time that she came back to work?

25 A. On June 19th, and then I met with her that morning

1 June 20th.

2 Q. So she worked the seven to seven ---

3 A. Uh-huh.

4 Q. --- June 19th and June 20th?

5 A. Uh-huh.

6 Q. Okay. Was Ms. Rowott given the opportunity to
7 provide an explanation about the incident?

8 A. Yes. I asked her that if she had wanted to --
9 asked Kim to mail a statement in if she wanted to.

10 Q. And did she provide a written statement at that
11 time?

12 A. No.

13 Q. Do you usually meet with employees to discuss
14 anytime incidents occur?

15 A. Uh-huh. I do.

16 Q. And what is the policy for counseling employees for
17 disciplinary matters?

18 A. Verbal, written, suspension, termination.

19 Q. Okay. And when was Ms. Rowott's employment
20 terminated?

21 A. 6/20/08.

22 Q. Do you have any other information that you can
23 provide pertaining to this matter?

24 A. No.

25 Q. Okay. I don't have any further questions. If you

1 can answer any questions the Panel may have or Ms.
2 Rowott.

3 A. Sure.

4 Q. Thank you.

5 MS. GODBOLD: Ms. Rowott, now you have -- you can
6 ask your questions.

7 EXAMINATION OF MS. WHEELER BY THE RESPONDENT, MS. ROWOTT:

8 Q. Ms. Shannon, you said the pagers or the tracer
9 badge only goes off when you go in and out of the
10 room. Is that correct?

11 A. No. What do you mean the pager badge only goes off
12 as you're in and out of the room?

13 Q. The badge that we wear ---

14 A. Uh-huh.

15 Q. --- to keep a track where we're at ---

16 A. Right.

17 Q. --- goes on when we enter the room and off when we
18 enter the room?

19 A. No. The sensor in the room picks it up. But the
20 tracker, I mean, the system is on all the time.
21 That's how come it picks you up in the hallway and
22 as you're walking down hallways and at the care
23 stations, at the nursing stations, stuff like that.
24 So it's a continuos. It picks you up at the
25 section that you're in.

1 Q. But it doesn't have to be on you for it to record
2 you as being in that room?

3 A. Yes. It has to be in the room to ---

4 Q. Yes.

5 A. --- for it to pick you up.

6 Q. But it doesn't have to be on your person to record
7 where you're at?

8 A. If you're saying -- if you can set a, a tracker
9 down in the room and walk out, it will record you
10 in the room. Yes.

11 Q. Yes. And it does if it's outside even hanging on
12 something. Is that correct?

13 A. It'll pick up outside but not in the room.

14 Q. Yes.

15 A. You have to be in the room for it to pick you up.

16 Q. Yes.

17 A. Uh-huh.

18 Q. You stated that the system would go off or you
19 would be alerted if the badge wasn't on a person or
20 something had lost track of you. Is that ...

21 A. There's not -- no. The alert -- there's -- the
22 only alert that goes off is if the main system
23 needs to, needs a reset by maintenance. That's the
24 alarm you hear. What I was talking about, if I, if
25 you were working and I'm at the desk and a patient

1 has called and I need to find you, I'm looking at
2 that main screen. And if I don't see you, then
3 I'll have to overhead page you for you to answer
4 me, and I'll tell you your badge is not working,
5 you need to change your battery.

6 Q. But you are aware that at night shift overhead
7 paging is not possible?

8 A. It's possible. We ask -- we discourage it, but it
9 is possible. And we have also asked people if you
10 don't see them, if you don't want to overhead page,
11 go find them. Personally leave the desk and go
12 find them.

13 Q. One more question.

14 A. Sure.

15 Q. The secretary normally leaves between ten and 11?

16 A. Uh-huh.

17 Q. There are no secretary to look at the monitors or
18 look at that during that time. That is correct?

19 A. Right. From 11 P to seven A, 5-C does not have a
20 secretary. It's the nursing staff that's to
21 monitor their patients' rooms and call lights.

22 Q. One more question. When we are using the MAC
23 system, which is a scan for medications, you scan
24 medications; scan arm band ---

25 A. Uh-huh.

1 Q. --- and you're already in the system, would that
2 not be a record of where you're at at the same
3 time?

4 A. Uh-huh.

5 Q. Okay.

6 A. If you gave meds at -- during that time, the MAC
7 system would, would say that you charted, you gave
8 a med at that time. Yes.

9 Q. Thank you.

10 MS. GODBOLD: Questions?

11 EXAMINATION OF MS. WHEELER BY THE PANEL:

12 MS. SCAGLIONE: Were any medications given to
13 patient M.L. between two and six a.m.? The
14 patient in question? Do you have a copy of
15 the MAR?

16 A. Was that anything you requested ---

17 MS. ANDINO: The State has a copy. We didn't feel
18 it necessary to enter it. But if the Panel
19 would like to review it, we can make copies of
20 it.

21 MS. GODBOLD: I think so, since the question
22 directly relates to it, we would.

23 MS. ANDINO: Okay. If you can give me -- I don't
24 know if you want to take a break for me to
25 make copies enough for everyone?

1 MS. GODBOLD: Yes. We can take a five-minute
2 break.

3 MS. ANDINO: Okay. I'll be right back.

4 (Off the record from 11:03 a.m. to 11:09 a.m.)

5 MS. ANDINO: I'll go ahead and enter as State's
6 Exhibit Number 7, at the Panel's request, MAR
7 records for patient M.L.

8 (Whereupon, the MAR records for patient
9 M.L., consisting of 10 pages, is marked
10 as the State's Exhibit Number 7 for
11 identification).

12 MS. GODBOLD: Do you have any objection? Ms.
13 Rowott, do you have any objection?

14 MS. ROWOTT: No, ma'am. Thank you.

15 MS. SCAGLIONE: Okay. Thank you.

16 MS. GODBOLD: Do you have questions?

17 MS. RICE: No. I'm okay.

18 MS. GODBOLD: What is your policy on assessments on
19 an oncoming shift?

20 A. A full assessment is done once every 24 hours.

21 MS. GODBOLD: Okay.

22 A. Now we ask that, on 5-C, that at least heart and
23 lungs are done every shift.

24 MS. GODBOLD: Okay.

25 A. That's what we ask. But the official policy is

1 once every 24 hours.

2 MS. GODBOLD: All right. And as we go back to
3 Exhibit 5, which is the detail log, we see
4 that with patient -- during that time, say two
5 a.m. to six a.m., there aren't really any
6 entries for 0200. There are entries for 0500.
7 And I just want to make sure I am interpreting
8 it correctly. 0500 and then there is a 0300.
9 Correct?

10 A. You're looking at ---

11 MS. GODBOLD: I'm looking at different patients.

12 A. This -- oh, the different patients?

13 MS. GODBOLD: Yes.

14 A. So it's picking up at different times.

15 MS. GODBOLD: And the time in the room is actually
16 minute and seconds?

17 A. Uh-huh.

18 MS. GODBOLD: I have no further questions.

19 RE-EXAMINATION OF MS. WHEELER BY MS. ANDINO:

20 Q. I'd like to follow up with a question related to
21 one of the Panel member's questions. If you can
22 refer to State's Exhibit Number 5, in room number
23 5321, we're showing some, some logs for Ms. Rowott
24 on June 13th. Does it show that she entered that
25 particular room at 2:30? Approximately 2:30 that

1 morning?

2 A. Uh-huh.

3 Q. What about 3:17 that morning?

4 A. It shows it. Uh-huh.

5 Q. And at 4:21?

6 A. Yes.

7 Q. And in other patient rooms, for example room number
8 5324, does she enter that particular room at
9 approximately 3:20 and 5:11 a.m. on June 13th?

10 A. Yes.

11 Q. And let's see. In patient room 5325, does she also
12 enter that room at around 3:27, 3:31, and 5:22, and
13 5:23?

14 A. Yes.

15 Q. So per these records, it's showing that she did
16 into -- did enter into other patients' rooms at
17 two, three, four, and five?

18 A. Yes.

19 Q. Thank you.

20 MS. GODBOLD: Very good. You may be excused
21 Shannon.

22 A. Am I done, done?

23 MS. ANDINO: Do you think you that you'll need Ms.
24 Wheeler?

25 MS. GODBOLD: We would like for you to wait,

1 please.

2 MS. ANDINO: And you can just wait out there in the
3 lobby. Thank you.

4 A. Thank you.

5 MS. GODBOLD: Ms. Rowott, do you have witnesses?

6 MS. ROWOTT: No, ma'am.

7 MS. GODBOLD: Would you like to testify?

8 MS. ROWOTT: Yes, ma'am. I would like to, to make
9 some points, please.

10 MS. GODBOLD: All right. You need to be sworn in.

11 Whereupon,

12 Juanita Kim Rowott, RN is duly sworn and cautioned
13 to speak the truth, the whole truth, and nothing
14 but the truth.

15 STATEMENT BY THE RESPONDENT

16 MS. ROWOTT: Okay. The point I'd like to make is I
17 did my job on the 12th. I did what my nursing
18 training showed me to do. My only problem
19 being the MAC that I use to chart with had to
20 be plugged in. It would not work otherwise.
21 And it shows that it's outside the room 21 as
22 well as 22. When the lady in 22 -- I assessed
23 her and she came out and sat outside for a
24 while with us. That was between nine and so
25 on. And I'm going from memory because I

1 didn't know anything about this until the
2 20th. She asked for something to drink, and
3 she has arthritis in her hands. I remember
4 her vividly by just looking at the reports
5 that I got when I went on my shift. And I
6 gave her a cup and she sat down in a chair.
7 It's rolling kind of like what we're setting
8 on now. And as we -- I was standing next to
9 her charting on a MAC, and that is a mobile
10 plug-in. You scan your badge, the patient's
11 arm band before you give them anything or do
12 anything, hang any fluids, anything. And she
13 -- when she set down, it rolled back too fast.
14 I caught her by the leg as she was setting
15 down. The -- what she had in her hands
16 spilled and when it hit the floor -- of course
17 I'm in front of her -- it caught most of my
18 pants and up the side of my uniform. I jumped
19 away. It wasn't hot, so I wasn't burned or
20 anything. But I don't know if it was coffee
21 or Coke. We don't keep decaffeinated coffee
22 on the floor. When it hit me, though I
23 noticed what a spot it'd leave and I didn't
24 want to go around all night like that. This
25 happened before 12 o'clock. It wasn't after

1 12 or anything like that. I know it was
2 before 12. The little vest thing I had over
3 top is what I had my scanner on, because it
4 must be uncovered for it to pick you up as you
5 move. And you pin a safety pin inside and
6 then it kind of latches on. And we found them
7 in patients' beds and everything like that, so
8 to secure them is rather hard. The little
9 vest I had on, my name badge and stuff was on
10 a chain with my lab scan, and I put them
11 together and they're on a little chain. I
12 opened my blouse top and I put that on and
13 then it just clips here to hold it securely.
14 That tracer badge goes here or anywhere above
15 here so it can pick up. When it hit me, it
16 went automatically through everything I had on
17 here. But I opened this up, took this off
18 when they had sent me another top. But in the
19 meantime, just taking this off, I folded it,
20 put it over top of the back of the ladies'
21 chair that was setting there. Then we made
22 sure she was cleaned up and okay and helped
23 her back to bed. That's the reason for it had
24 to be close to eight, nine, somewhere in that
25 area. But it was before 12 o'clock I know. I

1 sent a little note downstairs in the little
2 slot that we send lab tests and requests that
3 I needed some kind of a top because I had
4 spilled stuff on my top, and I could not go in
5 other patients' room and them thinking they're
6 blood or some excretions from some other
7 patient. And they sent me up a little top,
8 but as you can see I'm a pretty large person,
9 so I was unable to wear what they had sent me.
10 My name and stuff proceeded to be still on
11 here, but what I wear as my tracer was not on
12 me most of the night. It was either on the
13 chair -- and I rinsed it off in the little
14 sink that's right outside of room 5322.
15 There's a sink and a little area there for
16 charting and plugging in those MAC's and
17 stuff, because everything is mobile now.
18 After I'd rinsed it off, I had to figure out a
19 way to dry it because I'm pre-menopausal where
20 you have hot flashes and then you're froze to
21 death. So I hung it on the back of the chair
22 and proceeded to check it throughout the night
23 to see how it was. And then I realized we
24 didn't have a patient in room 01, so I took
25 the top part and put it over top of the little

1 air vent that went over there. It got almost
2 dry and I hung it across the little handle
3 that you have on the MAC with a little table
4 next to it for you to do your medications
5 from. So it hung there until even after I
6 gave report that morning. I don't know how it
7 picked me up anywhere else because it was
8 hanging there. And if I took the MAC to give
9 some kind of medicine or hang some kind of
10 fluid or some kind of feeding, then it would
11 record that because it was still on the
12 machine that I was pushing. But otherwise, it
13 shouldn't have picked me up anywhere other
14 than where it was. And I had it plugged in,
15 because it wasn't on me. It was on the
16 machine instead. And when I left, the person
17 that I gave report to even had to remind me
18 that, hey, you're forgetting something.
19 Because I'd plugged that in, and I had to turn
20 the machine over to the one that I was
21 reporting off to. I looked after my patients;
22 I have for all these years. I would never
23 leave a person unattended or not looked at in
24 any way. Because I took care of my mother, I
25 took care of my father until he passed away

1 two months before this happened. And that was
2 a ten-year affair. Both bedfast, so there's
3 no way that I would leave anyone in a position
4 to where no one checked on them. When you're
5 in the hospital, you're there for a reason
6 because you can't be home with the people that
7 love you. And it's our job to take care of
8 them, and this I did. I didn't answer Ms.
9 Wheeler a lot on the 13th -- the 20th because
10 I was, I was astonished when she told me what
11 she planned to do. And the paper was there,
12 the termination papers there already for me to
13 see before we discussed anything. When I saw
14 that, I couldn't figure out, because I'd
15 worked that night, what I had done. I worked
16 on the 6th, the 13th -- this happened on the
17 12th. I got off at nine, 9:30 that morning,
18 went home, had a sleeping pill because of
19 disorders from things I've just mentioned, and
20 my husband wouldn't wake me up no matter what
21 because I had to be at work by 6:30 that
22 evening and work 12 hours again. And this was
23 on the six, the 13th. I went in six, the 12th
24 and worked all night. Got off late because of
25 clearing up problems and things that happened,

1 did my charting, finished everything, and was
2 astonished, because I know from looking at the
3 report that I had what I would have charted on
4 these patients even without talking or even
5 being with them. I know the importance of
6 just looking at that, what would be the need
7 to check everything on them. There's no way
8 that I would not do that. No way. That's the
9 reason we're here now, because there's no way
10 that I would not give good care. There's no
11 way that I would not chart what I needed to
12 chart even if I had to call in and not work
13 that night because I had stayed so long that
14 same morning. I have never stayed out of work
15 other than being sick or any kind of
16 emergency. And I needed to say that, so thank
17 you for listening.

18 MS. GODBOLD: Do you have questions?

19 MS. ANDINO: I do.

20 EXAMINATION OF THE MS. ROWOTT BY MS. ANDINO:

21 Q. I just want to clarify on your testimony. You --
22 and we have the answer that you submitted ---

23 A. Yes.

24 Q. --- to us, which I think is State's Exhibit Number
25 2. In there on -- let's see. You numbered them

1 page 2, section 7 (A) related to the monitor badge.

2 You stated -- do you need a copy of this to ---

3 A. No. I have a copy over there. Thank you.

4 Q. Okay. It states that, as you stated, patient 5322

5 dropped a cupcake on floor. My vest, top, and

6 pants got most of it. My vest top with my badge

7 was hanging on a chair back outside room 5322 most

8 of the night.

9 A. Yes.

10 Q. So I just wanted to clarify on your testimony here

11 today. So the badge -- the, the sensor, it hung on

12 the back of a chair most of the night?

13 A. It was on the back of the chair after I had rinsed

14 off the corner of it. The badge is here and it's

15 just like a, just like this except it has no

16 sleeves.

17 Q. Uh-huh.

18 A. It was on -- the badge hangs right here with a

19 safety pin ---

20 Q. Uh-huh.

21 A. --- to make sure it snaps. This hit this way, and

22 I rinsed this off underneath a sink right there in

23 front of 22. It's right next to a little table

24 like this type thing. There's a sink here to wash

25 your hands and stuff. The room is right here

1 directly in the back of me.

2 Q. Okay.

3 A. Plug-in is right here for -- to recharge batteries,
4 because there's nothing else there and you need to
5 chart there.

6 Q. And you said that that chair was outside the room?
7 That the chair where the ID badge hung, that was
8 outside the room?

9 A. The chair, it could either be outside the room,
10 it's on rollers ---

11 Q. Uh-huh.

12 A. --- or usually patients on our facility, which is
13 pulmonary and cardiac, because we do cardiac
14 monitoring, too.

15 Q. Uh-huh.

16 A. I not only was assigned five patients which is
17 unusual for a charge nurse. We were short that
18 night, and I also had 32 patients -- five
19 personally to look after because they had just had
20 trachs or other problems with them and two new
21 nurses, one just off orientation and one second
22 night or first night. I have a copy of schedules
23 if I should give them to you. I'm sorry, I didn't
24 know you would ask me this. So I had three nurses
25 including myself and two new people. I had one PCT

1 or a nursing assistant that could not lift more
2 than ten pounds, so she usually did vital signs.
3 She couldn't lift anything, so she couldn't help
4 change and move.

5 Q. Okay. So your testimony, you stated don't --
6 because your badge was hanging on the chair for
7 most of the night. That was somewhere before
8 midnight. Correct?

9 A. Had to be before midnight.

10 Q. How do ---

11 A. I don't remember it -- after midnight, I remember
12 checking to see if it was getting dry because they
13 come and go. I, I don't -- well, I know some of
14 you probably have had them, but during this time
15 you're cold and froze to death sometimes and
16 burning up next time. So I took the little vest --
17 and in room 01, there was no patient in that room
18 as yet.

19 Q. Uh-huh.

20 A. There was before the night completed. So I hung it
21 over top of like a little vent in the corner of the
22 room that air comes up. And I just placed it over
23 that corner.

24 Q. And it ---

25 A. So it should show my badge if it's uncovered in

1 room 0 -- 5301, which is right across from 22.

2 Q. Okay. And after you, you allowed it to dry through
3 the vent, you stated, and you've stated, you know,
4 you stated your answer and you stated here today
5 that it hung on a chair outside that room for most
6 of the night. Sometime between -- before midnight
7 up until the end of your shift? Is that your ---

8 A. Toward the end of my shift, I had to get it out of
9 room 01 and it was hung on the little MAC. We have
10 MACS and COWS that you plug in to scan patients and
11 medication records and also to do your charting in
12 these. And they must be plugged in for you to
13 chart. If the battery is down, you can't do
14 anything on them without them plugged in. So it
15 has a handle on the side and on the other side a
16 place for you to do medications, place anything you
17 want to like notes that you've got for this
18 particular patient or something. And that's what
19 you go by.

20 Q. Okay. So I just want to be clear. You hung the ID
21 badge on the chair for most of the night. Did you
22 move it somewhere else towards the end of the
23 shift? Is that what, is that what you're stating?

24 A. Yes.

25 Q. You moved it to the MAC machine? Is that what

1 you're stating?

2 A. It was first -- when it happened, patient most
3 important.

4 Q. Uh-huh.

5 A. Got this off to make sure, like I said, it wasn't
6 hot.

7 Q. Uh-huh.

8 A. It didn't feel hot to me. But I thought patient,
9 some of it went on her. So the main thing was to
10 turn her around and make sure she's okay. And then
11 I kind of drip, drip, drip. I took the top part
12 off.

13 Q. Uh-huh.

14 A. And right then I just hung it on the back of her
15 chair. As we were laughing and I even sopped a
16 little bit off of her lower leg with my thing that
17 I'd taken off. And we were -- she was laughing and
18 I was, too. And I hung it on the back of her
19 chair, helped her into her room. And that's when I
20 came back out, rinsed it under the sink, and then
21 hung it on the back of the chair. Because this
22 time somebody else had yelled or hollered and I had
23 to go there. And then I came back to check and see
24 if it was dry. It wasn't because it's kind of like
25 this, a lot of things dry real easily. And I took

1 it to room 01, put it over top of the little vent
2 that comes up, and then kept checking it throughout
3 as I did my work. And like I said -- and asked
4 after ten or 11 o'clock there's no secretary. So
5 the charge nurse is also the secretary for the
6 floor, too.

7 Q. Uh-huh.

8 A. So I had five patients, two new nurses. I was the
9 secretary from 10:30 or 11 o'clock, whenever the
10 secretary left, and I had a mess on my hands. And
11 I handled it. That is -- I am a registered nurse
12 and very proud of it. And I handled that situation
13 the best that I could handle it, and I would change
14 nothing not even now.

15 Q. As you can see from Exhibit Number 5, the tracking
16 record, it shows your ID badge in, in the room, in
17 different rooms around 2:30, three, four, five, and
18 so on. Do you -- can you explain why it would pick
19 up? Do you have an explanation as to why it would
20 pick you up in those rooms if your badge was
21 hanging on the chair?

22 A. Like I said, if it wasn't hanging on the chair it
23 was in that room drying. And once it had begun to
24 dry, I hung it on a MAC that I was scanning with to
25 do meds. We share these machines and you have to

1 plug them in. I trust people there. There's
2 nothing in there that you care for anybody to mess
3 with on the floor.

4 Q. Uh-huh.

5 A. So I left it as is, did my other stuff, and even at
6 the front desk where the secretary is because we
7 got in a new patient. I had to go to the front and
8 admit this patient and help the new nurse get them
9 settled in a room and make sure they were safe. We
10 make our rounds every two hours. We make one round
11 on all patients before 12 o'clock. Then you need
12 to make another round after 12, and that's because
13 you're the charge nurse. I'm not normally a charge
14 nurse because I have had a lot of emotional things
15 going on. The past three years it's been really
16 difficult. Everyone was aware that I'm going
17 through this. And I should have not been put in a
18 -- that position and under that stress knowing that
19 I was recovering and that was per one of their
20 advisors, Bonnie Brown, who I visit regularly for
21 therapy.

22 Q. Okay. I don't have any further questions at this
23 time.

24 MS. GOBOLD: Do you have questions?

25 EXAMINATION OF MS. ROWOTT BY THE PANEL:

1 MS. SCAGLIONE: I have one question. Ms. Rowott,
2 was any other staff member in M.L.'s room with
3 you at two or four a.m. and could say that you
4 were in there at two or four a.m. assisting
5 with oral care and turning her? Did anyone
6 help? Was anyone else in the room with you on
7 those two occasions that may have helped you
8 turn the patient or assisted with perineal
9 care?

10 A. She is a very light person. She doesn't weigh very
11 much. I remember her as very slender. I can
12 usually turn and maintain patients up to 500
13 pounds. I can turn them easily, care for them
14 easily, of course in a dressing change or anything
15 extra gentle or they might need extra care
16 somewhere, then I would call for an assistance from
17 a bedside. Like I said, had a nursing assistant, I
18 think her -- I don't even remember what her name
19 was. Okay? But she can't lift no more than ten to
20 15 pounds. And she could also change this lady
21 too, all she needed was some assistance. She could
22 lift her hip; she could move; she couldn't walk
23 very well, but she needed assistance.

24 MS. SCAGLIONE: If, if, if, I can ask one more
25 time. Was there anyone that was in the room

1 with you in M.L.'s room at two or four in the
2 morning that could say you were in that room
3 performing oral or perineal care and turning
4 the patient, or was it you alone?

5 A. There might've been one outside. Not assisting but
6 saw even though the curtain was pulled. The doors
7 are always left open at night unless it's a younger
8 person and requests it to be shut, or a family
9 member's with a patient and wants it shut. The
10 doors are always open so you can see as you walk
11 because it's limited personnel. And respiratory,
12 there was a respiratory lady that was outside, but
13 she was working on 21, 5321. Has a trach and total
14 care and stuff, so she was there checking his trach
15 and his stuff out. She was outside. They have the
16 same mobile type machinery that we do that has to
17 be plugged in. And so you go inside and do your
18 whatever and then come outside to do your charting.

19 MS. SCAGLIONE: So the answer would be there was no
20 one in the room with you assisting Ms. M.L.?

21 A. At the time that I was in there, there was no one
22 in there.

23 MS. SCAGLIONE: Thank you. And my last question
24 is, to some of your explanation of charting,
25 you assisted the patient with oral care. Why

1 did she need to be assisted with oral care at
2 two or four in the morning?

3 A. She had a lot of -- she came from a procedure that
4 day. And on the evening shift when they
5 transferred her to us, she was going to go home but
6 there was no one there to pick her up. And she has
7 dentures, and if I remember correctly -- I have
8 dentures too -- she had a sore on the corner of her
9 mouth. She had her own medication. But while she
10 was putting the -- her stuff from a tube on the
11 sore, I cleaned her dentures and she put them back
12 in her own mouth.

13 MS. SCAGLIONE: Okay. Thank you.

14 A. That's the only reason. That's why I remember I, I
15 know I charted this, this, and this. But if what's
16 here is not what all I charted on all my patients.
17 It just isn't.

18 MS. SCAGLIONE: Is it possible that you weren't in
19 the rooms between two and four a.m. and out of
20 habit you charted that you were in there doing
21 oral care and perineal care? It could have
22 been a computer documentation error is my
23 question. If you were, if your badge wasn't
24 picking you up in the room. Has that ever
25 happened before?

1 A. Oh, yes. It has happened countless times.

2 MS. SCAGLIONE: When you chart?

3 A. It has happened countless of times to all present
4 on all floors. When we have our town crier's
5 meeting -- which is downstairs in the auditorium --
6 they actually took a show of hands to the CEO that
7 runs that. Our biggest complaint to him was that
8 it can flash you anywhere you are and you're not
9 there. There's no one there.

10 MS. SCAGLIONE: Okay. Thank you.

11 A. You're welcome. Thank you.

12 MS. SCAGLIONE: No further questions.

13 MS. GODBOLD: Do you have questions?

14 MS. RICE: Just, you said that you don't usually do
15 charge and that it was a mess, and there's a
16 lot of things going on, you had new nurses.
17 Did you at anytime call for any help from a
18 nursing supervisor or anybody?

19 A. Yes, I did. Thank you for bringing that up because
20 yes, I did. And the nursing supervisor was on the
21 floor before 12 o'clock. I don't recall -- it's
22 like I said, if they had have mentioned this, on
23 the night of the 13th when I worked, I had the same
24 sheets that I had with me and what I charted and
25 didn't chart, we could have went over and I could

1 have showed them and talked to them better about
2 what happened because it was the night before. On
3 the 13th, when I went into work that evening, no
4 one mentioned that anything was wrong. Another
5 lady was charge nurse because, you know, she was
6 back then. And I was assigned another group of
7 patients which is normal for me. I usually work
8 two days a week, sometimes three. I've even worked
9 full-time, but I've always been classified as PRN.
10 It was by my choice because my family always came
11 first. And I'd, like I said, I've worked for them
12 for that long. But I was only a nurse since 1994.
13 But since then, I've been very proud of what I do
14 and always my patients and anyone -- I've reported
15 thousands of people that didn't do what they's
16 promised they would do. And that's the reason I
17 was telling her I can't sign something that's
18 wrong, because this is wrong. I didn't do this. I
19 did my job, what I was supposed to do.

20 MS. RICE: Okay.

21 A. Thank you.

22 MS. RICE: Did the nursing supervisor come on to
23 the unit and help?

24 A. The nursing supervisor came on to the unit,
25 manually opened medication carts because we could

1 not get them open. We tried. They had not plugged
2 anything in that day and they would not open. And
3 these are not the big Pyxis that's on the wall that
4 holds narcotics and all of that. These are the
5 small carts that's on the units for holding
6 medication, and they lock automatically. But if
7 they're not plugged in and the motor is not
8 charged, you cannot get in even those to give
9 medications that's normally just for that
10 particular patient. So she came and opened that
11 cart, and I told her what was going on. But her,
12 her response to me was, I'm sure you can handle it
13 because you've handled it so well before.

14 MS. RICE: Okay. Did you document anywhere that
15 you notified the supervisor?

16 A. Only on the charge nurse -- only on the sheets that
17 we turn in when we're done. And that was my
18 question, my first one to Shannon when she
19 approached me on six the 20th. I said did you read
20 the paper that I attached like that? I set extra
21 in the clock room writing out things that I thought
22 she needed to know about the floor and stapled them
23 to a charge sheet and put them in Shannon's letter
24 box that she has in the little thing right inside a
25 little room that you open a door and you can get in

1 there. It's access to another little machine.

2 MS. RICE: Thank you.

3 MS. GODBOLD: Any other questions? On the
4 documentation that you provided yourself,
5 under 7A you wrote -- and I assume you would
6 testify this is your writing, that the patient
7 dropped cupcake on the floor.

8 MS. GREEN: It says Coke.

9 A. It's, it was like ---

10 MS. GREEN: Coke. Coke.

11 A. Yes.

12 MS. GODBOLD: Where I'm reading it says dropped
13 cupcake.

14 A. I'm sorry. It's like ---

15 MS. GREEN: That's Coke.

16 A. --- in a white cup. A little bigger than this.

17 MS. GODBOLD: Oh, Coke. It looks like cupcake.
18 Okay.

19 A. I'm sorry. It's kind of like this. It could've
20 been Coke because we only give them decaffeinated
21 coffee and Diet Coke so they don't know it.

22 MS. GODBOLD: All right.

23 A. But we only give -- so anything like that appears
24 on a white ---

25 MS. GODBOLD: Sure.

1 A. --- and I didn't want to enter any peoples' rooms
2 with other stuff on me. That's not doing good care
3 anyway.

4 MS. GODBOLD: Yes.

5 A. And there's nothing on the floor to cover this.

6 MS. GODBOLD: Where was the patient when the Coke
7 was spilt?

8 A. Was setting in one of the chairs. There's usually
9 a desk a little bigger than this. There's two
10 chairs that set next -- because this is where we
11 give our report. We ask may we shut your door
12 while we give oral report to each other. And
13 there's two chairs, so our patients -- this one had
14 just been transferred up here. The other nurse,
15 Sandy Messer, I think's who I got the report from,
16 said she would take care of looking her over and
17 this and that and just get her settled and then
18 she's going on. And she came out and she set in
19 the other chair. I was setting over here
20 organizing my things that I needed to start my
21 shift and all the problems that we had organizing
22 what, top to bottom, what was most important. And
23 she set in a chair like that next to me. And I
24 never paid any attention to that because their
25 stuff is usually well shielded and she just wanted

1 someone to talk with and wanted to know, you know,
2 that she -- why they had sent her up there and she
3 couldn't go home. Just typical things. And she
4 just set in the chair next to me. But she come in
5 and out of that room quite a bit that night to set
6 in the chair and go back. And she had this little
7 walker like thing with her because she does need
8 assistance. That's one of the reasons why they
9 kept her there I believe.

10 MS. GODBOLD: You go on to state that my vest top
11 with my badge was hanging on a chair back most
12 -- outside of room 5322 most of the night.

13 A. Yes.

14 MS. GODBOLD: Okay.

15 A. And that was immediately when this happened, it was
16 immediately. That's where -- after I dabbed at her
17 and I said you know, are you okay? Like I said, at
18 the moment I didn't think hot, cold, nothing. I
19 knew mine didn't feel like it was hot. But she's
20 my patient. She's anybody's patient. That's my
21 job to see that she's okay.

22 MS. GODBOLD: Yes, ma'am.

23 A. And I dabbed at her, and then I just slapped it on
24 the back of her chair, just didn't even hang it,
25 just kind -- and then helped her up. And I said,

1 why don't we take you back to bed and I'll give you
2 a new gown. That was my exact words to her and it
3 comes naturally that's what I would say to her.

4 MS. GODBOLD: But you said that it was there for
5 most of the night and yet when we look at
6 Exhibit 5, it shows you actually in patient
7 rooms at seven p.m.; eight p.m.; nine p.m.;
8 9:55, which is almost ten p.m.; 11 p.m.; 12
9 p.m.; 12:30; 1:30. It shows you in patient
10 rooms almost every hour.

11 A. That was before 12.

12 MS. GODBOLD: There was ---

13 A. Before 12 when -- it was before 12 when this
14 happened.

15 MS. GODBOLD: There is a, you were in a patient
16 room, her room at 12:39 a.m., 12:22 a.m.,
17 12:40 a.m., so almost one o'clock. There's a
18 three a.m., a five a.m. -- so it shows you in
19 multiple patient rooms almost every hour
20 during the night. There was a 12:37. Do you
21 have any explanation on how it could show you
22 in all these patient rooms?

23 A. I have no explanation for that. I just know what
24 happened.

25 MS. GODBOLD: Okay.

1 A. I don't know -- like I said, this was before 12.
2 After 12 I felt it wasn't getting dry and I went to
3 the room right across from there, laid it on the
4 vent. And then I did go get it sometime during
5 that period and hung it on my machine, because I
6 didn't want to leave it there. But even before I
7 left, the person that I was exchanging, -- turning
8 my patients over to had to remind me, you're
9 leaving your vest. And I didn't even at that time
10 know that I didn't have my badge on. I didn't know
11 until I got in the back part of the room and was
12 finishing my charting and the little page that we
13 staple to give, turn over to Shannon for her
14 review, or whoever's going to relieve them. And
15 the paper that I wrote on, that's what I asked her.
16 Did you not get the sheet of paper that I attached
17 to the charge stuff, the problems that was here,
18 need to, you need to look into?

19 MS. GOBOLD: Okay. Any other questions?

20 MS. SCAGLIONE: One last question. Again, the
21 issues at hand is in M.L.'s room between two
22 and four. You have no explanation as to why
23 your badge did not go off and show that you
24 were in her particular room. Correct?

25 A. That is correct. I honestly have told you

1 everything that I recall from that night.

2 MS. SCAGLIONE: Thank you.

3 MS. GODBOLD: Do you have any other questions?

4 MS. ANDINO: No.

5 MS. GODBOLD: I would like to call back Ms., I
6 think it's Wheeler. If we may. Was it, was
7 it Wheeler?

8 MS. ANDINO: Shannon Wheeler.

9 MS. GODBOLD: Yes. Ms. Wheeler.

10 MS. SCAGLIONE: Thank you.

11 MS. GODBOLD: Thank you. You can have a seat and
12 ...

13 A. Okay. Thank you.

14 RE-EXAMINATION OF MS. WHEELER BY THE PANEL:

15 MS. GODBOLD: Ms. Wheeler, you are still under
16 oath.

17 A. Uh-huh.

18 MS. GODBOLD: I have just one question for you.

19 A. Sure.

20 MS. GODBOLD: When you received the complaint, did
21 you actually question the patient M.L. to
22 determine if the nurse had been in her room?

23 A. Not M.L. M.L. was in 22. The patient complaint I
24 received was on 5323, and that's what prompted the,
25 to me to look at all her patients. And whether or

1 not I popped into that -- if I spoke with M.L. or
2 not, I didn't write anything down so I wouldn't be
3 able to recall.

4 MS. GOBOLD: Any, any other questions?

5 MS. SCAGLIONE: Was there any other problems as far
6 as documentation on, on this particular nurse?
7 Any other computer documentation problems, not
8 understanding the computer, any, any training
9 that needed to be redone?

10 A. Not that I was aware of.

11 MS. SCAGLIONE: Okay. How long had, had Ms. Rowott
12 been using the computer system at your
13 facility, particularly the one that was used
14 here to document?

15 A. Lord, we started back in ClinDoc I think back in
16 2004 or something like that. And she -- Kim was a,
17 a member of our unit even before we went to
18 computerized documentation. So she went through
19 the whole training and the whole program just like
20 the rest of us.

21 MS. SCAGLIONE: Thank you.

22 MS. GOBOLD: I have no further questions. Thank
23 you.

24 MS. ANDINO: Can she be excused at this time?

25 A. Can I go?

1 MS. GODBOLD: Yes, you can.

2 A. Thank you.

3 MS. ANDINO: Thank you very much.

4 MS. GODBOLD: Would you like to do your summation?

5 CLOSING REMARKS FOR THE STATE BY

6 MS. ANDINO: Just very briefly. The State would
7 contend that based on, on the evidence here
8 today that the State has met its burden and
9 proven that by a preponderance of the evidence
10 Ms. Rowott did violate specifically section
11 40-33-110 (A) 18 in that she failed to make or
12 keep accurate intelligible entries and records
13 as required by law. And that she violated
14 section 40-1-110 (f) and that she committed a
15 dishonorable, unethical or unprofessional act
16 that is likely to deceive, defraud or harm the
17 public. And the State would only request that
18 the Panel make a recommendation to the Board
19 appropriate to these violations. Thank you.

20 MS. GODBOLD: Thank you. Would you like to make a
21 summation?

22 CLOSING REMARKS BY THE RESPONDENT

23 MS. ROWOTT: I remain I did my job that night to
24 the best of my ability to do it. And this
25 situation that was scheduled for me to enter

1 into. I did all my nursing laws. I did my
2 charting. I'm sorry I did not think about
3 that badge. If I'd a known it would've been
4 so important, I would have embronzed it or
5 something. But it has been the badge I was
6 issued when the thing first come out. I never
7 understood the importance -- if you kept a
8 good eye on your patients, you shouldn't need
9 a badge to tell where you're at to be
10 honorable and do your job. I still feel that
11 way. I'm part of checking every two hours on
12 patients. I am proud of that and I will
13 continue to do whatever I can to see that a
14 square deal is given to all concerned. Thank
15 you very much.

16 MS. GODBOLD: Thank you.

17 MS. SCAGLIONE: Thank you.

18 MS. GODBOLD: You will receive notification from
19 the State Board of Nursing. Thank you.

20 MS. ROWOTT: Thank you.

21 MS. GODBOLD: And we'll go into a closed session.

22 (Whereupon, at 11:57 a.m., the proceeding
23 in the above-entitled matter was
24 concluded.)

25

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

4 Be it known that I, Jennifer S. Angooraj Professional
Verbatim Court Reporter and Notary Public in and for the
5 State of South Carolina, took the foregoing hearing at 11:57
a.m. on Monday, November 9, 2009;
6

7 That the foregoing 79 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 16th day of November, 2009.
12
13

14 _____
Jennifer S. Angooraj
15 Notary Public for South Carolina
My commission expires March 14, 2017
16
17
18
19
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22
23
24

25 This transcript may contain quoted material. Such material
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:

JUANITA KIM ROWOTT, R.N.
License No. RN.61119

OIE # 2008-361

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.

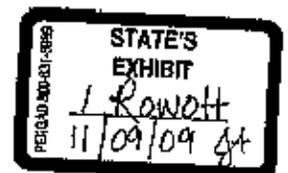
Failure to timely file your Answer in this matter may result in the allegations being admitted and a default judgment being rendered against you.

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

Joan K. Bainer, MN, RN, NE BC

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

August 17th, 2009.



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

IN THE MATTER OF:

JUANITA KIM ROWOTT, R.N.
License No. RN.61119

OIE # 2008-361

Respondent.

FORMAL COMPLAINT

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 during Respondent's 7 PM to 7 AM shift on June 12, 2008, at Greenville Hospital in Greenville, S.C., she documented on newly-admitted patient M.L.'s records that she provided care to said patient at approximately 2 AM and 4 AM, but the nurse call tracking system shows that Respondent did not enter said patient's room between 12:40 AM and 6:30 AM.
- B. That during the above-referenced shift, Respondent documented on newly-admitted patient D.C.'s records that she provided care to said patient at approximately 2 AM and 4 AM, but the nurse call tracking system shows that Respondent did not enter said patient's room between 12:30 AM and 5:00 AM. Respondent was terminated on June 26, 2008.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. § 40-33-110(A)(18) and § 40-1-110(f) (1976, as amended), in the following particulars:

- A. Respondent has violated § 40-33-110(A)(18) (1976, as amended), in that she failed to make or keep accurate, intelligible entries in records, as required by law, policy, or standards for the practice of nursing.
- 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.

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

08/14/09
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:

JUANITA KIM ROWOTT, R.N.

License No. RN.61119

OIE # 2008-361

Respondent.

NOTICE OF HEARING

To: Ms. Juanita K. Rowott, Respondent

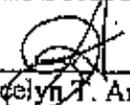
PLEASE TAKE NOTICE THAT:

1. The hearing in the above-captioned matter has been scheduled for **November 9, 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

08 / 14 / 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:

JUANITA KIM ROWOTT, R.N.

License No. 61119

OIE #2008-361

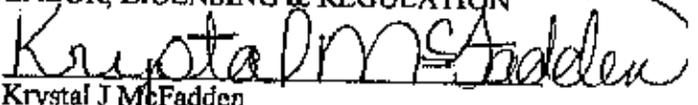
Respondent.

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. Juanita K. Rowott
315 Highlawn Avenue
Greenville, SC 29617-2816

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

August 18, 2009.

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8/19/09
 Postmark Here

Total Post: **Ms. Juanita K. Rowitt**

Sent To: [Redacted]

Sent By: [Redacted]

City, State, ZIP: [Redacted]

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- 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. Juanita K. Rowitt

[Redacted Address]

COMPLETE THIS SECTION ON DELIVERY

A. Signed by: [Signature] Agent Addressee

B. Received by (Printed Name): _____ Date of Delivery: 8-20-09

C. Is delivery address different from item 1? Yes No
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**SOUTH CAROLINA DEPARTMENT OF LABOR, LICENSING AND REGULATION
BEFORE THE STATE BOARD OF NURSING**

IN THE MATTER OF:

JUANITA KIM ROWOTT, R.N.
License No. RN.61119

OIE # 2008-361

Respondent.

WAIVER OF ATTORNEY

I, Juanita Kim Rowott RN do hereby waive my right to have an attorney
(Print Name)

represent me before the State Board of Nursing on this 9th day of November of 2009.

I am freely, voluntarily, and knowingly waiving my right to an attorney in this proceeding.

Juanita Kim Rowott RN
Respondent

[Signature]
Witness

ATTN Krystal S. McFadden
SOUTH CAROLINA DEPARTMENT OF LABOR
LICENSING AND REGULATION
OFFICE OF GENERAL COUNSEL
PO BOX 11329
COLUMBIA S.C. 29211-1329

NOTICE

To The Above-NAMED:

Please find the following answer to
said Format Complaint. OIE #2008-361.

Juanita Kim Rowatt RN
Suanita Kim Rowatt R.N.
License No. RN61119

September 04, 2009.



September 04, 2009

June 20, 2008, after working 7pm until 7AM. I sat in utter amazement as my Nurse manager Shannon Wheeler SC told me I was terminated related to past family complaints and false documentation on the night of June 12, 2008.

To whom it may concern:

- I. Assignments June 12, 2008 made by dayshift Charge Nurse Stephanie Hellams.
 - (A) I was Night Charge Nurse.
 - (B) I was assigned five patients.
 - (C) Four other nurses:
 - one completed orientation.
 - one 3rd night on orientation.
- II. Ms. Hellams continued report with frequent interruptions from staff, family members and secretary with calls related to problems, to phone calls, etc.
- III Started Night routines.
 - (A) Rounding check all patients.
 - (B) Resolved problems, turned patients per request, gave water etc.; any small task that I could do.
- IV New RN Lai Chaim:
 - (A) 3rd night of orientation.
 - (B) Encouraged, supported; tried to give her one on one help.

V Charting

[A] Simple task as I did them.

[B] unable to do complete notes on floor. Would chart at end of shift as most day and night employees have done for some time; Nurse manager has knowledge of this.

VI Scanning Equipment

[A] MAC's and Cow's battery down. We shared the one's that would scan medications and armbands if plugged into circuit.

[B] unable to open floor medication cart. Various people unable to help. Notified Nursing Supervisor. Cart opened manually.

VII monitor badge

[A] patient 5322 dropped cup cake on floor; My vest top and pants got most of it. My vest top with my badge was hanging on a chair back outside of Room 5322 most of night.

[B] Please Note.

This machine has many problems; Calls secretary desk by self, Shows badge numbers in a sudden flash from one room to another or one hallway to another no one there.

VIII I find it very hard to put into words what takes place on this floor

at times and how each person or situation is recorded, reported and resolved.

VIII Emotion focused behavior:

[A] Doctors, Nurses, patients and significant others have unreal expectations during any life changing hospitalizations. Each person's perception of his/her own health problems will be at variance with the provider's opinion related to the emotion focused behavior.

[B] I have first-hand experience of personal life changes, Crisis, grief and anxiety. My Nurse manager, Co-workers, Employee assistance counselor, Bonnie Brown, and my doctors are well aware of the changes that have taken place in my life. The most recent two co-workers, my brother in-law, and my father's death as well as changes in my own health.

X I feel; I did my job to the best of anyone's ability to handle this scheduled situation as evidenced by the following Employees Don Vedders, Fran Shater, Chi Konda Williams and Kai Chaim. [See oral report/ Scheduled Sheet.]

July 2008

Schedule

July 2008

Name	Position	S	M	T	W	Th	F	S	S	M	T	W	H	Mo	Tu	We	Th	F	S	S	M	T	W	H	F	S			
7P-7A RN'S		8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5
Jeanne Bianchi					P		P	P	P	-		P	P																
Cindy Tegeler			P	P	P			P	P			P	P																
Linda Davis		P													P	P													
Lucy Arritt				P				P	P	P		P			P														
Dori Vedders		P		P	P							P			P	P													
Fran Sharer		P					P	-		P	P				P	P													
Lauren Slice					P		P	P	P	-		P	P																
Andrea Cunningham			P	P				P	P	P																			
open																													
Elaine Bussey			P	P				P	P		P	P																	
Hillary Stewart		P									P				P	P													
Chilkonda Williams		P			P						P	P																	
Lai Chaim		P	P				P	-		P	P																		
Kim Rowott (PT)			P				P						P																
open																													
Tina Brooks		6	5	5	5		5	6	6	5	5	5	5	5	4	5	5	5	5	5	5	6	6	6	6	5	5	5	5
Diane Pittman																													

you may switch around but #s cannot be below 5 or above 6

June 12-13, 2008 [Oral Report from Stephanie Hellams/Sandy Masse
RN
RN

Rm. 5321 Bonillas 39 yom wt: 105 lbs

MD: Hospit.

Dx: MI, HTN, Brain Injury, Resp. failure,
Decubitus ulcer, Joint contractures,

opens eyes only: TOTAL Care [Level 4]

vitals: RTN \ activity: BR

* oxygen: #4 Trach > 28% T-piece

NPO Peg & probalance

Ⓛ Picc & Vans KVO = 25 cc/Hr.

Blood Sugars 6 AM \ 6 PM

Urinary: Foley

Bowel: rectal tube - bag

Rm. 5322 Lawrence 92 yof wt: 110 lbs.

MD: Hospit.

Dx: Acute Renal failure, DM, CHF,
Chest pain, A-fib, S/P pacemaker,

* Cat: III

[VRE / MRSA precautions]

Alert/oriented x3,

vitals: RTN \ activity: assist

Room air

Ⓛ UASW - (+) blood return.

Low salt ADA diet. dentures & sore lower gum.

* Blood Sugar AC \ HS SNACK

urinary: diaper. stress incontinence.

Bowel: * Stool sp x3 for Hemov.

June 12-13, 2008 (oral report from Stephanie Hellas / Sandy Mester)

W. 53 23 Carlisle 56 yof WT: 398 lbs.

MDs Hosp. it.

DX: S/p fall, PSA, CRI, CHF, Diarrhea,
HTN, Obesity, Depression,

* Cat: III

[contact prac.]

Alert / oriented x2

Vitals: RTN | activity = AS tolerated @LE casts

Oxygen: 2 liters nasal cann. * HS - b: PAP

Ⓟ Picc Line - may draw blood from)

2000 ADA diet

* Blood Sugar AC / HS SNACK

urinary: Foley

Bowel: S/p removal rectal tube (stool dry, paste)

* stool spox †

W. 53 24

Ashley 55 yof wt: 321 lbs

MDs PTS

DX: HTN, COPD, Rep. failure,
Severe Anxiety, Panic disorder,

* New Trach Stoma;

[contact VRE?]

Alert / oriented x2

Vitals: RTN activity: AS tolerated

* Oxygen: #8 extra long inter Cann | 28% Trach Collar. \ Cont. Sat
Monitoring

Ⓟ Picc Line - may blood draw.

Sips liquid & PO meds.

* Blood Sugar AC / HS Notif. MD per Nursing protocol

urinary: BSC & family will assist;

* Bowel: HAT for BSC need stool sp: family / pt. aware.

June 12-13, 2008 (oral Report from Stephanie Hestans/sandy messer
RN)

M 5325 James 55 yof wt: 97 lbs

MD: Hospit.

DX: HTN(+), HTN, MI, s/p CVA,
pneumonia, (R) paralysis.

[contact pre: VRE.

* Cat: III

Alert/oriented x 11/10 TOTAL Care [level 4]

Vitals: RTN | activity & BR

Room air

(2) UA saline lock

Sip honey thicken liquid | Peg. probalance

urinary > Incontinence Total

Bowel

END OF Report.

Diana VLL

I completed my work as usual, very late,
the morning of June 13, 2008.
I returned that same night of June 13,
to work my scheduled time.

one week or seven (7) days and nights
passed with no one notifying me
of any complaints or problems.

I did my job as per our nursing laws
and my work site's protocol.
I did my charting on the same machine
all night.

yes, I did not have my badge on all night.

Thank you's

Juanita Kim Rowatt RN
Juanita Kim Rowatt RN
License NO RN 61119

September 04, 2009

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

IN THE MATTER OF)
)
JUANITA ROWOTT, R.N.)
LICENSE #61119)
)
OIE #)
)
Respondent.)

COPY

DEPOSITION OF:
Cynthia Trout

Deposition of Cynthia Trout, taken before Terri A. Winiarski, Nationally Certified Court Reporter and Notary Public in and for the State of South Carolina, commencing at the hour of 9:59 a.m., Thursday, October 29th, 2009, at the offices of the South Carolina Department of Labor, Licensing and Regulation, 110 Centerview Drive, Columbia, South Carolina.

Reported by:
Terri A. Winiarski, CVR

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STATE'S EXHIBIT
3 ROWOTT
11/09/09 JA

A P P E A R A N C E S

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

For the Respondent: Not present/represented by counsel

Reported by: Terri A. Winiarski, CVR

INDEX TO EXAMINATIONS

Stipulations	4
Examination of Ms. Trout by Ms. Andino	5
Certificate	14

INDEX TO EXHIBITS:

There were no exhibits marked in this deposition.

Cynthia Trout -

1 Procedures Act. It is agreed and stipulated by the
2 deponent that the reading and signing of the
3 deposition will be expressly waived in this matter.

4 Please state your full name for the record.

5 A. Cynthia Trout.

6 Q. Ms. Trout, where are you currently employed?

7 A. The Greenville Hospital System in Greenville, South
8 Carolina.

9 Q. And what are your duties there?

10 A. I'm the Director of Nursing.

11 Q. And how long have you been the Director of Nursing?

12 A. Since 1995.

13 Q. And normally, what shifts do you work?

14 A. During the daytime.

15 Q. And what hours would that be?

16 A. Probably eight -- an average of eight/8:30 to five
17 or six.

18 Q. And how were you made aware of the incident
19 relating to Ms. Juanita Rowott, back in June of
20 2008.

21 A. The nurse manager notified me -- Ms. Shannon
22 Wheeler.

23 Q. What was her name again?

24 A. Shannon Wheeler.

25 Q. And when did you find out about this incident?

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Cynthia Trout -

- 1 A. Sometime -- it, it actually occurred on the 13th, I
2 think. So it was reported on the 13th. So I
3 probably heard about it a day or two later, after
4 Shannon completed her investigation.
- 5 Q. And is it standard procedure for you to be informed
6 of situations like this --
- 7 A. Yes.
- 8 Q. -- these types of occurrences?
- 9 A. Yes.
- 10 Q. Okay. And briefly, what did the nurse manager, Ms.
11 Wheeler, relate was the situation?
- 12 A. She informed me that there was a patient complaint
13 and that she had reviewed the records and looked at
14 the documentation that the nurse had made and
15 looked at the call-system log to see when the nurse
16 was in that patient's room and that she had -- the
17 nurse had documented care and there was no record
18 on the call system that she had been in the room at
19 that time.
- 20 Q. And are you located on the floor where all of this
21 occurred?
- 22 A. I am.
- 23 Q. And what floor is that?
- 24 A. It's the fifth floor at Greenville Memorial
25 Hospital.

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Cynthia Trout -

1 Q. And what unit?

2 A. 5-C --

3 Q. Okay.

4 A. -- is the pulmonary unit.

5 Q. Okay. And were you working on June 12th?

6 A. No, I was not.

7 Q. What about the 13th? Do you recall?

8 A. I'd have to go back and look. I don't remember
9 what day that was, but I had a wedding that
10 weekend, and I think I was off on Thursday and
11 Friday before that weekend.

12 Q. Okay. What actions did you take with regards to
13 this matter after being informed of Ms. Wheeler's
14 investigation?

15 A. Well, Shannon Wheeler brought all the information
16 to me -- all the documents to me, and we sat down
17 and reviewed it together. And then, I recommended
18 that she talk with HR about what had occurred and
19 what they recommended as far as actions with that
20 employee. Once she talked to HR and we determined
21 what we thought needed to be done, then I spoke
22 with my supervisor to run that through her.

23 Q. So did you conduct a separate investigation of the
24 matter?

25 A. Not a separate investigation. But after Shannon

Cynthia Trout -

1 looked at all the documentation, we sat down with
2 it together just so I could confirm what she had
3 found and to make sure that I knew exactly what had
4 happened before we made a decision.

5 Q. So your review or your involvement in the
6 investigation was basically review -- essentially
7 reviewing what Ms. Wheeler had gathered -- the
8 information Ms. Wheeler had gathered?

9 A. Correct.

10 Q. Okay. And you stated you reviewed the patient's
11 records; is that correct?

12 A. I reviewed the records that we had in here where
13 she had documented on the patient.

14 Q. And did you also review nurse call-tracking system?

15 A. I did.

16 Q. Okay. You previously stated you spoke to Ms.
17 Wheeler and you reviewed the investigation with
18 her. Were there any other staff or any other
19 personnel that you spoke to about this incident?

20 A. I did not interview anyone else, but I know that
21 Shannon spoke with another nurse about it.

22 Q. Okay. But you, personally --

23 A. I did not.

24 Q. -- only with Shannon?

25 A. Right.

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Cynthia Trout -

1 Q. Do you know if Ms. Rowatt was given the opportunity
2 to provide a statement or an opportunity to explain
3 the allegations against her?

4 A. Yes.

5 Q. And how were you made aware that she got a chance
6 to provide that explanation?

7 A. I have the documentation from when Shannon Wheeler
8 actually met with her -- I believe, on June the
9 20th -- and she documented that she offered her an
10 opportunity to provide a statement. And that's
11 also documented on her disciplinary action form.

12 Q. Okay. And did she provide a statement that --

13 A. No.

14 Q. -- you know of?

15 A. Not that I know of.

16 Q. You said you spoke with Ms. Wheeler and talked
17 about informing HR and what action to take. Were
18 you responsible -- or was it your responsibility to
19 determine what action needs to be taken?

20 A. I -- it is, but I don't make those types of
21 decisions -- not, not of this magnitude -- without
22 discussing that with the associate chief nursing
23 officer who's my boss.

24 Q. So you discussed it with your CNO?

25 A. The CNO and the associate CNO were both aware

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Cynthia Trout -

1 before we did the termination and filed the
2 complaint.

3 Q. So you -- I guess, based on those discussions, you
4 concluded that termination was appropriate?

5 A. Correct.

6 Q. Did you meet with Ms. Rowott to discuss this
7 matter?

8 A. I did not.

9 Q. Okay. Did you ever contact her?

10 A. I did not.

11 Q. Do you usually meet with employees to discuss
12 incidences like this?

13 A. Not generally.

14 Q. Okay. And what is the policy whenever there is a,
15 you know, a discipline matter, a disciplinary
16 issue? What is the policy for counseling
17 employees?

18 A. Generally, the manager takes care of the
19 investigation and the counseling of the employees.

20 Q. And in this situation, who would that manager be
21 for Ms. Rowott?

22 A. Shannon Wheeler.

23 Q. Shannon Wheeler? Okay. Did you know Ms. Rowott
24 personally?

25 A. I did not.

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Cynthia Trout -

1 Q. Okay. To your knowledge, did she continue to work
2 at Greenville Memorial?

3 A. Not that I'm aware of.

4 Q. Would you say that in this particular situation
5 that your involvement or your knowledge is mainly
6 administrative --

7 A. Yes.

8 Q. -- in nature?

9 A. Yes.

10 Q. Is there any other information you think you could
11 provide?

12 A. I don't think so.

13 Q. Okay. If you'll give me just a minute to make sure
14 that I've asked everything. And you said after
15 reviewing the documentations and the records with
16 Ms. Wheeler, was it your previous testimony that
17 you determined that Ms. Rowatt had falsely
18 documented the patient records?

19 A. Yes.

20 Q. Okay. And how did you come to that conclusion?

21 A. Because in the medical record, there was
22 documentation that she had provided direct care to
23 the patient. And in -- on the call log, there was
24 no documentation that she had been in the room at
25 that particular time. She had gone from around 12

Cynthia Trout -

1 midnight to around five a.m. and was not shown as
2 being logged into that room.

3 Q. And to your knowledge, are you familiar with the
4 call log --

5 A. Uh-huh.

6 Q. -- as far as its efficiency?

7 A. Yes.

8 Q. Is it pretty accurate as relating to being able to
9 properly document whenever someone enters the room?

10 A. Yes, I've found it to be accurate in documenting
11 that if they're in the room giving care.

12 Q. Do you -- have you known of any technical
13 difficulties that may occur with that system?

14 A. Not in particular -- not, not with that one on that
15 floor. I mean, I'm -- there may have been things
16 that have happened in the past, but I'm not aware
17 of any issues at that particular time with the
18 system.

19 Q. And to your knowledge, does the nurse -- in order
20 to enter the room, does she -- does the nurse have
21 to scan --

22 A. No.

23 Q. -- the ID in order to enter?

24 A. No. They wear a badge on their uniform and the
25 system automatically picks them up when they walk

Results

LAWRENCE, MILDRED R F 92
Dr: TEAGUE, LEIGHTON D. JR
Adm Dt: 05/31/08 ID

085C / 5322AM MED
099
Iscl: C

Pt#: 8010375728
Mr#: 247012034

06/13/08		08:00	07:03	06:00
NRS ACTIVITY CONT	09:30			Y
Fall Prevention				
Linen Changed	Y			
Category				
06/13/08 09:30	Pt Observed	Y	SCH05C	
Resting quietly				
06/13/08 08:00	Pt Observed	Y	CWE04A	
Resting quietly				
06/13/08 07:03	Pt Observed	Y	SCH05C	
Resting quietly				
06/13/08 06:00	Pt Observed	Y	NURJRR	
Resting quietly				

Group Continued

06/13/08		02:00	00:00	06/12/08
NRS ACTIVITY CONT	04:00			22:00
Patient Observed	Y T	Y T	Y T	Y T
Meal				
Diet Type				
Percent Intake				
CHO Served				
CHO Eaten				
Meal Activity				
Bath				
Oral Care	Assist Complete Right	Assist Complete Right	Assist Complete Left	Assist Complete Right
Perineal Care				
Turning				
Ambulate				
>ROOM				
Activity				
>Ad Lib				
>Bed Rest	Y	Y	Y	Y
>Chair (Minutes)				
>Bedside Commode				
>BR Privileges				
Bed Alarm On	N	N	N	N
Bed Low/Locked	Y	Y	Y	Y
Bed Prevention On	Y	Y	Y	Y
Siderails Up	3	3	3	3
Equipment				
>SCD				
>Telemetry Monit				
Isolation				
>Contact	Y	Y		
Fall Prevention	Y	Y	Y	Y
Linen Changed				
Category				
06/13/08 04:00	Pt Observed	Y	NURJRR	
Resting quietly				

Group Continued

Greenville Memorial Hospital

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Detail Staff Activity Report by Room/Location

From 6/12/2008 19:00:00 To 6/13/2008 07:59:59

Room: 5321	Unit: 5 C	Location Type: Patient Room		
<u>Date</u>	<u>Time</u>	<u>Locator ID</u>	<u>Title</u>	<u>Time In Room</u>
06/12/2008	7:09:44 PM	13393	RN	3:43
06/12/2008	8:26:50 PM	13393	RN	0:59
06/12/2008	8:49:47 PM	13393	RN	2:11
06/12/2008	9:29:06 PM	28301	None	12:26
06/12/2008	9:52:20 PM	13393	RN	0:05
06/12/2008	9:52:35 PM	13393	RN	0:14
06/12/2008	9:53:33 PM	13393	RN	3:01
06/12/2008	9:56:43 PM	13393	RN	0:24
06/12/2008	11:03:57 PM	13393	RN	0:54
06/13/2008	12:23:54 AM	13393	RN	1:54
06/13/2008	12:26:27 AM	13393	RN	3:32
06/13/2008	1:26:12 AM	5819	CNA	0:26
06/13/2008	1:26:51 AM	5819	CNA	0:17
06/13/2008	1:28:55 AM	5819	CNA	0:18
06/13/2008	1:29:17 AM	5819	CNA	0:18
06/13/2008	1:29:39 AM	5819	CNA	0:22
06/13/2008	1:30:05 AM	5819	CNA	0:30
06/13/2008	2:31:06 AM	13393	RN	0:48
06/13/2008	3:17:54 AM	13393	RN	2:34
06/13/2008	3:21:33 AM	13393	RN	0:14
06/13/2008	4:21:01 AM	13393	RN	2:04
06/13/2008	6:24:31 AM	13393	RN	0:44
06/13/2008	6:25:29 AM	13393	RN	0:02
06/13/2008	6:25:50 AM	13393	RN	3:58
06/13/2008	6:30:43 AM	13393	RN	0:04
06/13/2008	7:26:24 AM	3500	RN	0:19

Room: 5321 Location Type: Patient Room

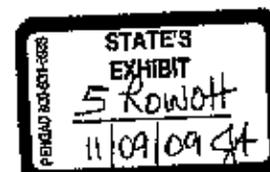
Total Number Of Staff Visits: 26

Average Amount of Time Spent in Each Location: 1:38

Maximum Amount of Time Spent in Each Location: 12:26

Total Amount of Time Spent in Each Location: 42:25

Room: 5321	Unit: 5 C	Location Type: Patient Room		
<u>Date</u>	<u>Time</u>	<u>Locator ID</u>	<u>Title</u>	<u>Time In Room</u>
06/12/2008	7:06:10 PM	24778	RN	0:04
06/12/2008	7:32:09 PM	13393	RN	0:20
06/12/2008	7:44:54 PM	24778	RN	0:23
06/12/2008	7:47:10 PM	24778	RN	1:44
06/12/2008	8:10:44 PM	13393	RN	0:19
06/12/2008	8:11:28 PM	13393	RN	2:13
06/12/2008	8:34:28 PM	28301	None	5:13
06/12/2008	8:39:46 PM	28301	None	1:20



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Detail Staff Activity Report by Room/Location

From 6/12/2008 19:00:00 To 6/13/2008 07:59:59

Room:	Unit:	Location Type:	Patient Room	
5322	5 C			
Date	Time	Locator ID	Title	Time in Room
06/12/2008	8:41:59 PM	28301	None	0:25
06/12/2008	8:42:37 PM	28301	None	0:52
06/12/2008	9:45:57 PM	28301	None	0:09
06/12/2008	9:50:22 PM	13393	RN	0:05
06/13/2008	12:11:51 AM	5819	CNA	0:40
06/13/2008	12:13:01 AM	5819	CNA	0:43
06/13/2008	12:13:48 AM	5819	CNA	1:58
06/13/2008	12:22:50 AM	13393	RN	0:35
06/13/2008	12:39:37 AM	13393	RN	0:19
06/13/2008	12:40:08 AM	13393	RN	0:49
06/13/2008	6:31:13 AM	13393	RN	0:04
Room: 5322 Location Type: Patient Room				
Total Number Of Staff Visits:				19
Average Amount of Time Spent in Each Location:				0:58
Maximum Amount of Time Spent in Each Location:				5:13
Total Amount of Time Spent in Each Location:				18:15

*5322
New
Admit
@ 6 PM*

*6 5 Nurse
Rounding.*

Room:	Unit:	Location Type:	Patient Room	
5323	5 C			
Date	Time	Locator ID	Title	Time in Room
06/12/2008	7:32:58 PM	13393	RN	2:49
06/12/2008	8:26:20 PM	28301	None	7:10
06/12/2008	8:28:14 PM	13393	RN	1:17
06/12/2008	8:30:31 PM	13393	RN	2:28
06/12/2008	9:44:46 PM	28301	None	0:14
06/13/2008	12:37:33 AM	13393	RN	0:58
06/13/2008	5:02:35 AM	13393	RN	0:19
06/13/2008	5:03:03 AM	13393	RN	0:24
06/13/2008	5:03:40 AM	13393	RN	1:24
06/13/2008	6:13:29 AM	13393	RN	3:41
06/13/2008	6:17:17 AM	13393	RN	0:17
06/13/2008	7:08:00 AM	25134	None	5:47
Room: 5323 Location Type: Patient Room				
Total Number Of Staff Visits:				12
Average Amount of Time Spent in Each Location:				2:14
Maximum Amount of Time Spent in Each Location:				7:10
Total Amount of Time Spent in Each Location:				26:48

*50 5
Nurse
Rounding.*

Room:	Unit:	Location Type:	Patient Room	
5324	5 C			
Date	Time	Locator ID	Title	Time in Room
06/12/2008	7:36:46 PM	13393	RN	0:29

Greenville Memorial Hospital

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Detail Staff Activity Report by Room/Location

From 6/12/2008 19:00:00 To 6/13/2008 07:59:59

Room: 5324	Unit: 5 C	Location Type:	Patient Room	
<u>Date</u>	<u>Time</u>	<u>Locator ID</u>	<u>Title</u>	<u>Time In Room</u>
06/12/2008	7:58:07 PM	28301	None	6:15
06/12/2008	8:04:33 PM	28301	None	0:35
06/12/2008	8:38:19 PM	13393	RN	5:57
06/12/2008	8:44:51 PM	13393	RN	2:02
06/12/2008	8:47:07 PM	13393	RN	0:06
06/12/2008	8:47:36 PM	13393	RN	0:22
06/12/2008	9:10:15 PM	13393	RN	0:14
06/12/2008	9:10:44 PM	13393	RN	0:21
06/12/2008	9:12:52 PM	28301	None	0:09
06/12/2008	9:13:54 PM	28301	None	0:52
06/12/2008	9:15:05 PM	28301	None	8:12
06/12/2008	9:57:59 PM	13393	RN	3:40
06/13/2008	12:07:56 AM	5819	CNA	0:27
06/13/2008	12:09:06 AM	5819	CNA	0:17
06/13/2008	12:44:18 AM	13393	RN	0:29
06/13/2008	12:44:57 AM	13393	RN	0:54
06/13/2008	12:46:05 AM	13393	RN	0:35
06/13/2008	3:20:14 AM	25831	RN	0:19
06/13/2008	3:23:26 AM	13393	RN	3:33
06/13/2008	5:11:16 AM	13393	RN	10:24
06/13/2008	5:22:20 AM	13393	RN	0:20
06/13/2008	5:50:09 AM	13393	RN	1:14
06/13/2008	5:52:47 AM	13393	RN	0:20
06/13/2008	5:53:25 AM	13393	RN	4:49
06/13/2008	5:58:36 AM	13393	RN	0:22
06/13/2008	5:59:17 AM	13393	RN	0:06
06/13/2008	6:00:38 AM	13393	RN	0:24
06/13/2008	7:14:36 AM	25134	None	5:30
Room: 5324	Location Type: Patient Room			
Total Number Of Staff Visits:				29
Average Amount of Time Spent in Each Location:				2:03
Maximum Amount of Time Spent in Each Location:				10:24
Total Amount of Time Spent in Each Location:				59:17

Room: 5325	Unit: 5 C	Location Type:	Patient Room	
<u>Date</u>	<u>Time</u>	<u>Locator ID</u>	<u>Title</u>	<u>Time In Room</u>
06/12/2008	7:36:06 PM	13393	RN	0:30
06/12/2008	8:22:47 PM	28301	None	2:22
06/12/2008	9:02:28 PM	13393	RN	0:27
06/12/2008	9:03:13 PM	13393	RN	0:19
06/13/2008	10:47:47 PM	28301	None	1:02
06/13/2008	11:55:43 PM	5819	CNA	0:15

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Detail Staff Activity Report by Room/Location

From 6/12/2008 19:00:00 To 6/13/2008 07:59:59

Date	Time	Locator ID	Title	Time In Room
06/12/2008	11:58:41 PM	5819	CNA	0:24
06/13/2008	12:47:25 AM	13393	RN	0:19
06/13/2008	12:47:59 AM	13393	RN	0:15
06/13/2008	3:27:09 AM	13393	RN	0:10
06/13/2008	3:31:46 AM	13393	RN	2:38
06/13/2008	5:22:40 AM	13393	RN	0:30
06/13/2008	5:23:35 AM	13393	RN	0:29
06/13/2008	7:26:21 AM	25134	None	4:33

Room: 5325 Location Type: Patient Room

Total Number Of Staff Visits: 14
 Average Amount of Time Spent in Each Location: 1:01
 Maximum Amount of Time Spent in Each Location: 4:33
 Total Amount of Time Spent in Each Location: 14:13

	Patient	Direct Patient Care	Other	All
Grand Total Number of Staff Visits:	100	0	0	100
Grand Total Average Time Per Visit in Rooms:	1:37	0:00	0:00	1:37
Grand Total Time In Rooms:	160:58	0:00	0:00	160:58

*** NOTE *** If selected location(s) are assigned to more than 1 Nursing Unit, report totals may be doubled or incorrect.

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Detail Staff Activity Report by Room/Location

From 6/12/2008 19:00:00 To 6/13/2008 07:59:59

Location(s):

5321, 5322, 5323, 5324, 5325

Hill Room Call Badges

2001

Name	Date	Phone #	Initials	Notes
Linda Hanley RN	9/20/01	# 13361	LH	SD
Carolyn Gorus RN	9/20/01	# 13400	CG	SD
Sandy Messer RN	9/20/01	# 13366	SM	SD
Missy Spencer RN	9/20/01	# 13380	MS	SD
Lee Sanders RN		# 13382	LS	SD
Dana Beach RN		# 13392	DB	SD
Steve Fleming RN		# 13346	SF	SD
Cassie Smith RN		# 13355	CS	SD
Galum Holder RN		# 13359	GH	SD
Betty Torres RN		# 13387	BT	SD
Carmen Bishop RN	9/20/01	# 13404	CB	SD
Jill Patton RN		# 13352	JP	SD
Missy Spencer RN		# 13358	MS	SD
Marcia Clark RN		# 13395	MC	SD
Rosemary Coppage RN		# 13381	RC	SD
Phillip Brown RN		# 13374	PB	SD
Joyce Scott RN		# 13393	JS	SD
* Kim Rowatt RN		# 13385	KR	SD
Paris Byrd LPN II		# 13349	PB	SD
Duloris Calhoun LPN II		# 13399	DC	SD
Miki Wyatt LPN		# 13368	MW	SD
Carol Smith RN		# 13372	CS	SD
Phillip Wright RN		# 13348	PW	SD
Emily Gardze RN		# 13390	EG	SD
Fae Smith RN		# 13389	FS	SD
Amy Day RN		# 13373	AD	SD
Debra Brown RN		# 13383	DB	SD
Theresa Crosby LPN I		# 13354	TC	SD
Rana Ashmore CNA		# 13360	RA	SD
Glynnis Lee CNA		# 13378	GL	SD
* Clover Brown PCT	9/20/01	# 13357	CB	SD
Pat Thomas LPN		# 13375	PT	SD
Jackie Jones CNA		# 13356	JJ	SD
Ruth Kymmer RN		# 13384	RK	SD
Valerie Wall PCT		# 13370	VW	SD
Jessica Butrau PCT		# 13347	JB	SD
Barbara Bryant PCT		# 13351	BB	SD
Sheila Beach PCT		# 13364	SB	SD
Samantha Johnson PCT		# 13364	SJ	SD



MI01 10c

LAWRENCE, MILDRED R
 PTH: 08010375728
 Age: 93Y Sex: F
 Admit DT: 05/31/2008
 Diagnosis: CHEST PAINS

MR#: 247012034
 HT: 67cm
 Discharge Date: 06/16/2008

OBSC 5022AM
 DOB: 01/05/1916
 WT: 046Kg 749.15g

Order Information	Sched Qs/Time	Chart Type	User Name Title	Status Admin Dose Cosign By	Vitals	Adm SRs Pain Scale PS Loc	Reason Info	Charted Effect
** SCHEDULED **								
APRESOLINE, SAME AS 25 MG = 1 TAB HYDRALAZINE 25 MG = 1 TAB Start Date: 06/03/2008 24:00 Stop Date:	6/12/2008 08:00	08:50	SANDRA K MESSER RN	ADMIN	BP: 118/59			
APRESOLINE, SAME AS 25 MG = 1 TAB HYDRALAZINE 25 MG = 1 TAB Start Date: 06/03/2008 24:00 Stop Date:	6/12/2008 16:00	17:00	SANDRA K MESSER RN	ADMIN	BP: 116/59			
APRESOLINE, SAME AS 25 MG = 1 TAB HYDRALAZINE 25 MG = 1 TAB Start Date: 06/03/2008 24:00 Stop Date:	6/12/2008 24:00	00:30	JUANITA KIM ROWOTT RN	ADMIN	BP: 156/76			
ASPIRIN EC 81 MG = 1 TAB Start Date: 06/10/2008 08:00 Stop Date: 07/17/2008 09:58	6/12/2008 09:00	09:50	SANDRA K MESSER RN	ADMIN				

RPG=Right Posterior Gluteal LRG=Left Posterior Gluteal RFG=Right Ventral Gluteal LFG=Left Ventral Gluteal RAT=Right Anterior Thigh LAT=Left Anterior Thigh RLH= Right Lateral Thigh LLH=Left Lateral Thigh RPB=Right Posterior Back LPB=Left Posterior Back RPA=Right Upper Arm LPA=Left Upper Arm RDB=Right Deltoid LDB=Left Deltoid RCB=Right Chest LCB=Left Chest RAB=Abdomen Void Codes: Ref 0/0 NEG



M10110c

LAWRENCE, MILDRED R
 PT#: 08010375728
 Age: 83Y Sex: F
 Admit DT: 06/31/2008
 Diagnosis: CHEST PAINS

MR#: 247012034
 HT: 67cm
 Discharge Date: 06/15/2008

Q85C 6322AM
 DOB: 01/06/1916
 WT: 046kg 749.15g

Order Information	Sched Date/Time	Chart Time	User Name Title	Status Admin Dose Cosign By	Vitals	Adm Site Pain Scale PS Loc	Reason Info	Charted Effect
*** SCHEDULED ***								
COURMADIN 1.5 MG = 0.5 TAB WARFARIN 1.5 MG = 0.5 TAB Start Date: 06/06/2008 21:00 Stop Date:	6/12/2008 21:00	20:03	JUANITA KBM ROWVOIT RN	ADMIN See NAC For ID				
INDUR, SAME AS 30 MG = 1 TAB ISOSORBIDE MONONITRATE 30 MG = 1 TAB Start Date: 06/01/2008 17:25 Stop Date:	6/12/2008 07:30	09:30	SANDRA K MESSER RN	ADMIN				
LANTUS PEN 5 UNT = 0.05 ML INSULIN GLARGINE PEN 5 UNT = 0.05 ML Start Date: 06/07/2008 21:00 Stop Date:	6/12/2008 21:00	20:06	JUANITA KBM ROWVOIT RN	ADMIN See NAC For ID		ABD		
LEXAPRO 10 MG = 1 TAB ESCITALOPRAM 10 MG = 1 TAB Start Date: 06/04/2008 09:00 Stop Date: SUBSTITUTE FOR CITALOPRAM PERP AND T COMMITTEE PROTOCOL	6/12/2008 09:00	09:30	SANDRA K MESSER RN	ADMIN				

RPG-Right Posterior Gluteal LPO-Left Posterior Gluteal RVG-Right Ventral Gluteal LVG-Left Ventral Gluteal RAT-Right Anterior Thigh LAT-Left Anterior Thigh RL- Right Lateral Thigh LL-Left Lateral Thigh RPB-Right Posterior Back LPB-Left Posterior Back RUA-Right Upper Arm LUP-Left Upper Arm RD-Right Deltoid LD-Left Deltoid RC-Right Chest LC-Left Chest ABD-Abdomen Hold Codes: RAC R/V NPO

M10110c

LAWRENCE, MILDRED R
 PT#: 08010375728
 Age: 93Y Sex: F
 Admitt DT: 05/31/2008
 Diagnosis: CHEST PAINS

MR#: 247012034
 HT: 67cm
 Discharge Date: 06/16/2008

085C 6322A&A
 DOB: 01/05/1916
 WT: 846Kg 749.15g

Order Information	Sched Date/Time	Chan Time	User Name Title	Status Admin Dose Cosign By	V/Rate	Adm Site Pain Scale PS Loc	Reason Info	Charted Effect
*** SCHEDULED ***								
LOPRESSOR, SAME AS 12.5 MG = 0.5 TAB METOPROLOL 12.5 MG = 0.5 TAB Start Date: 06/01/2008 17:25 Stop Date:	6/12/2008 06:00	09:30	SANDRA K MESSER RN	ADMIN	BP: 116/69 PU: 71			
LOPRESSOR, SAME AS 12.5 MG = 0.5 TAB METOPROLOL 12.5 MG = 0.5 TAB Start Date: 06/01/2008 17:25 Stop Date:	6/12/2008 21:00	20:00	JUANITA KIM ROWOTT RN	ADMIN	BP: 135/66 PU: 76			
NORMAL SALINE 100ml thru @100ml/hr FERRILECY 125 MG = 10 ML Start Date: 05/10/2008 18:00 Stop Date: X 8 DOSES.	6/12/2008 18:00	18:43	SANDRA K MESSER RN	ADMIN				
NOVOLOG PEN INSULIN ASPART PEN Start Date: 05/31/2008 24:00 Stop Date:	6/12/2008 07:15	07:44	SANDRA K MESSER RN	NOTADMIN			BS = 70	

RPO=Right Posterior Gluteal LPO=Left Posterior Gluteal RVE=Right Ventral Gluteal LVE=Left Ventral Gluteal RAT=Right Anterior Thigh LAT=left Anterior Thigh RLT= Right Lateral Thigh LLT=Left Lateral Thigh RPB=Right Posterior Back LPB=Left Posterior Back RUA=Right Upper Arm LUA=left Upper Arm RDB=Right Deltoid LDB=Left Deltoid RC=Right Chest LC=Left Chest ABD=Abdomen Hold Codes: Ref N/V NPO

NU. 0512

518043556-471

15:21

10/26/2006

M16110c

LAWRENCE, MILDRED R
PT#: 08010375728
Age: 93Y Sex: F
Admit DT: 05/31/2006
Diagnosis: CHEST PAINS

MR#: 247012034
HT: 57cm
Discharge Date: 06/15/2006

085C 5922AM
DOB: 01/05/1916
WT: 046Kg 749.15g

Order Information	Sched Date/Time	Chart Time	User Name Title	Status Admin Code Assign By	Units	Adm Site Pain Scale PS Loc	Reason Info	Charted Effect
SCHEDULED								
NOVOLOG PEN INSULIN ASPART #EN Start Date: 05/31/2006 24:00 Stop Date:	6/12/2006 11:15	11:25	SANDRA K MESSER RN	NOTADMIN			B5 - 77	
NOVOLOG PEN INSULIN ASPART #EN Start Date: 05/31/2006 24:00 Stop Date:	6/12/2006 16:15	16:48	SANDRA K MESSER RN	NOTADMIN			B5 - 62	
NOVOLOG PEN INSULIN ASPART #EN Start Date: 05/31/2006 24:00 Stop Date:	6/12/2006 21:00	09:28	JUANITA KIM ROWOTT RN	NOTADMIN			B6 100	
PROTONIX 40 MG * 1 TAB PANTOPRAZOLE 40MG = 1 TAB Start Date: 06/04/2006 09:00 Stop Date:	6/12/2006 08:00	09:30	SANDRA K MESSER RN	ADMIN				

RPG=Right Posterior Gluteal LRG=Left Posterior Gluteal RVC=Right Ventrals Gluteal LVG=Left Ventral Gluteal RAY=Right Anterior Thigh LAT=Left Anterior Thigh RLT= Right Lateral Thigh LLT=Left Lateral Thigh RPB=Right Posterior Back LRB=Left Posterior Back RUA=Right Upper Arm LVA=Left Upper Arm RDB=Right Deltoid LDB=Left Deltoid RC=Right Chest LC=Left Chest ABD=Abdomen Hold Codes: Rel N/A MCO

NU. 632

51H PLR NURSING HUNTLIN # 510030504471

15:21

10/26/2009

M10110c

LAWRENCE, MILDRED R
PT#: 08010375728
Age: 93Y Sex: F
Admit DT: 05/31/2008
Diagnosis: CHEST PAINS

MRN: 247012034
HT: 67cm
Discharge Date: 06/16/2008

085C 5322AM
DOB: 01/05/1916
WT: 045Kg 749.15g

Order Information	Sched Date/Time	Chart Time	User Name Title	Status Admin Dose Cosign By	Vitals	Adm Site Pain Scale PS Loc	Reason Info	Ordered Effect
-- SCHEDULED --								
PROTONIX 40 MG = 1 TAB PANTOPRAZOLE 40 MG = 1 TAB Start Date: 06/04/2008 09:00 Stop Date:	Q24H PO MED	6/12/2008 21:00 2008	JUANITA M M ROWYOTT RN	ADMIN				
SYNTHROID 37.5 MCG = 0.938 ML LEVOTHYROXINE 37.5 MCG = 0.938 ML Start Date: 06/01/2008 09:00 Stop Date: CONCENTRATION IS 40 MCG/ML	Q24H IV IV	6/12/2008 09:00 09:34	SANDRA K MESSER RN	ADMIN				

RPO-Right Posterior Gluteal LPO-Left Posterior Gluteal RVC-Right Ventral Gluteal LVC-Left Ventral Gluteal RAT-Right Anterior Thigh LAT-Left Anterior Thigh RLQ- Right Lateral Thigh LLQ-Left Lateral Thigh RPB-Right Posterior Back LPB-Left Posterior Back RUA-Right Upper Arm LUA-Left Upper Arm RD-Right Deltoid LD-Left Deltoid RUC-Right Chest LUC-Left Chest ABB-Abdomen Hold Codes: RxF N/V NPO

NO. 692 007

M10110c

LAWRENCE, MILDRED R
 PTR: 08010375728
 Age: 93Y Sex: F
 Admit DT: 06/11/2008
 Diagnosis: CHEST PAINS

MRF#: 247012034
 HT: 67cm
 Discharge Date: 06/16/2008

085C 5322AM
 DOB: 01/05/1916
 WT: 046Kg 749.15g

Order Information	Sched Date/Time	Chart Time	Ucar Name Title	Status Admin Dose Consign By	Visits	Adm SRe Pain Scale PS Loc	Reason Info	Charted Effect
*** SCHEDULED ***								
APRESOLINE, SAME AS 25 MG = 1 TAB HYDRALAZINE 25 MG = 1 TAB Start Date: 06/03/2008 24:00 Stop Date:	6/13/2008 08:00	08:01	CYNTHIA BOSWELL RN	ADMIN	BP: 138/55			
APRESOLINE, SAME AS 25 MG = 1 TAB HYDRALAZINE 25 MG = 1 TAB Start Date: 06/03/2008 24:00 Stop Date:	6/13/2008 16:00	16:17		ADMIN	BP: 120/59			
APRESOLINE, SAME AS 25 MG = 1 TAB HYDRALAZINE 25 MG = 1 TAB Start Date: 06/03/2008 24:00 Stop Date:	6/13/2008 24:00	08:47		ADMIN	BP: 131/71			
ASPIRIN EC 81 MG = 1 TAB Start Date: 06/10/2008 09:00 Stop Date: 07/11/2008 08:00	6/13/2008 08:00	08:01	CYNTHIA BOSWELL RN	ADMIN				

RPG=Right Posterior Gluteal LPGA=Left Posterior Gluteal RRG=Right Ventral Gluteal LVG=Left Ventral Gluteal RAT=Right Anterior Thigh LAT=Left Anterior Thigh
 ALM=Right Lateral thigh LLT=Left Lateral thigh RPP=Right Posterior Back LPP=Left Posterior Back RUP=Right Upper Arm LUP=Left Upper Arm
 RDL=Right Deltoid LDL=Left Deltoid RCL=Right Chest LCL=Left Chest ABO=Abdomen Hold Codes: R/L N/V N/A

51H PLR NURSING ADMIN → 9160309564474

15:21

6/13/2008

MI0110c

LAWRENCE, MILDRED R
PT#: 08010375726
Age: 93Y Sex: F
Admit DT: 05/31/2008
Diagnosis: CHEST PAINS

MR#: 2470 12034
HT: 67cm
Discharge Date: 06/15/2008

055C 5322AM
DOB: 01/05/1916
WT: 046Kg 749.15g

Order Information	Sched Date/Time	Chart Time	User Name Title	Status Admin Dose Cosign By	Vitals	Adm Site Pain Scale PS Loc	Reason Info	Charted Effect
*** SCHEDULED ***								
COUMADIN 2.5 MG = 0.5 TAB WARFARIN 1.5 MG = 0.5 TAB Start Date: 06/08/2008 21:00 Stop Date:	6/13/2008 21:00	21:31		ADMIN				See MAC For ID
100UR, SAME AS 30 MG = 1 TAB ISOSORBIDE MONONITRATE 30 MG = 1 TAB Start Date: 06/01/2008 17:28 Stop Date:	6/13/2008 07:30	08:01	CYNTHIA BOSWELL RN	ADMIN				
LANTUS PEN 5 UNIT = 0.05 ML INSULIN GLARGINE PEN 5 UNIT = 0.05 ML Start Date: 06/07/2008 21:00 Stop Date:	6/13/2008 21:00	21:31		ADMIN		RT ARM		See MAC For ID
LEXAPRO 10 MG = 1 TAB ESCITALOPRAM 10 MG = 1 TAB Start Date: 06/04/2008 09:00 Stop Date:	6/13/2008 09:00	09:01	CYNTHIA BOSWELL RN	ADMIN				

RFG=Right Posterior Gluteal LFG=Left Posterior Gluteal RVG=Right Ventral Gluteal LVG=Left Ventral Gluteal RAT=Right Anterior Thigh LAT=Left Anterior Thigh RLT=Right Lateral Thigh LLT=Left Lateral Thigh RPB=Right Posterior Back LPS=Left Posterior Back RUA=Right Upper Arm LLA=Left Upper Arm RDB=Right Deltoid LDB=Left Deltoid RC=Right Chest LC=Left Chest RAB=Abdomen Bold Codes: Ref N/Y NPO

1001 2008

M10110c

LAWRENCE, MILDRED R
 PTE: 08010375728
 Age: 83Y Sex: F
 Admit DT: 05/31/2008
 Diagnosis: CHEST PAINS

MR#: 247012034
 HT: 57cm
 Discharge Date: 05/15/2008

085C 6322AM
 DOB: 01/05/1916
 WT: 045Kg 749.15g

Order Information	Sched Date/Time	Chart Time	User Name Title	Status Admin Dose Cosign By	Vitals	Adm Site Pain Scale FS Loc	Reason Info	Charted Effect
== SCHEDULED ==								
LOPRESSOR, SAME AS 12.5 MG = 0.5 TAB METOPROLOL 12.5 MG = 0.5 TAB Start Date: 05/01/2008 17:25 Stop Date:	5/13/2008 08:00	09:01	CYNTHIA BOSWELL RN	ADMIN	BP: 135/66 PU: 86			
LOPRESSOR, SAME AS 12.5 MG = 0.5 TAB METOPROLOL 12.5 MG = 0.5 TAB Start Date: 05/10/2008 17:25 Stop Date:	5/13/2008 21:00	21:21	Brenda Jones RN	ADMIN	BP: 141/75 PU: 103			
NORMAL SALINE 100ml 1hrs @100ml/hr FERULECY 125 MG = 10 ML Start Date: 05/10/2008 18:00 Stop Date: X 6 DOSES.	5/13/2008 18:00	19:57	Brenda Jones RN	ADMIN				
NOVOLOG PEN INSULIN ASPART IPEN Start Date: 05/21/2008 24:00 Stop Date:	5/13/2008 07:16	08:04	CYNTHIA BOSWELL RN	NOTADMIN			SQ90	

31H FLK NURSING HUNLIN 7 210035554471

10:21

5002/2/08

RPG=Right Posterior Gluteal LFG=Left Posterior Gluteal RVC=Right Ventral Gluteal LVS=Left Ventral Gluteal RAT=Right Anterior Thigh LAT=Left Anterior Thigh RLt= Right Lateral Thigh LLt=Left Lateral Thigh RPB=Right Posterior Back LPB=Left Posterior Back RUA=Right Upper Arm LUA=Left Upper Arm RD=Right Deltoid LD=Left Deltoid RC=Right Chest LC=Left Chest ABD=Abdomen Roid codes: Ref N/V NPO

M10110c

LAWRENCE, MILDRED R
 PT#: 08010375728
 Age: 93Y Sex: F
 Admit DT: 05/31/2008
 Diagnosis: CHEST PAINS

MR#: 2470 12034
 HT: 67cm
 Discharge Date: 06/16/2008

065C 5322AM
 DOB: 01/05/1916
 WT: 046Kg 749.15g

Order Information	Sched Date/Time	Chart Time	User Name Title	Status Admin Dose Cosign By	Units	Adm Site Pain Scale PS Loc	Reason Info	Charged Effed
*** SCHEDULED ***								
NOVOLOG PEN INSULIN ASPART PEN Start Date: 05/31/2008 24:00 Stop Date:	6/13/2008 11:15	11:24	CYNTHIA BOSWELL RN	NOT ADMIN			SD 101	
NOVOLOG PEN INSULIN ASPART PEN Start Date: 05/31/2008 24:00 Stop Date:	6/13/2008 16:16	16:17	Brenda Jones RN	ADMIN See MAC For ID	2 UNITS	65	166	RT ARM
NOVOLOG PEN INSULIN ASPART PEN Start Date: 05/31/2008 24:00 Stop Date:	6/13/2008 21:00	21:31	Brenda Jones RN	ADMIN See MAC For ID	2 UNITS	65	162	RT ARM
FRGTORNDX 40 MG = 1 TAB FRANTOPRAZOLE 40 MG = 1 TAB Start Date: 06/04/2008 09:00 Stop Date:	6/13/2008 09:00	09:01	CYNTHIA BOSWELL RN	ADMIN				

RPG=Right Posterior Gluteal LPG=Left Posterior Gluteal RVG=Right Ventral Gluteal LVG=Left Ventral Gluteal RAT=Right Anterior Thigh LAT=Left Anterior Thigh RLIT= Right Lateral Thigh LLIT=Left Lateral Thigh FRP=Right Posterior Back LFP=Left Posterior Back RUP=Right Upper Arm LUL=Left Upper Arm RD=Right Deltoid LD=Left Deltoid RC=Right Chest LC=Left Chest ABD=Abdomen Mid Centre: R/L N/Y N/D

MILDIG:

LAWRENCE, MILDRED R
PTR: 08010375728
Age: 93Y Sex: F
Admit DT: 05/31/2008
Diagnosis: CHEST PAINS

MR#: 2470-12034
HT: 67cm
Discharge Date: 05/15/2008

085C 6322AM
DOB: 01/05/1918
WT: 046Kg 749.15g

Order Information	Sched Date/Time	Chart Type	User Name Title	Status Admin Order Cosign By	Vitals	Adm Site Pain Scale PS Loc	Reason Info	Charted Effect
*** SCHEDULED ***								
PROTONIX 40 MG = 1 TAB PANTOPRAZOLE 40 MG = 1 TAB Start Date: 05/04/2008 08:00 Stop Date:	6/13/2008 21:00	21:31	Brenda Jones RN	ADMIN				
							Q24H PO MED	
SYNTHROID 0.06 MG = 1 TAB LEVOTHYROXINE 0.05 MG = 1 TAB Start Date: 05/13/2008 21:00 Stop Date:	6/13/2008 21:00	21:31	Brenda Jones RN	ADMIN				
							QHS PO MED	

RPO=Right Posterior Gluteal LPS=Left Posterior Gluteal RVO=Right Ventral Gluteal LVO=Left Ventral Gluteal RNT=Right Anterior Thigh LNT=Left Anterior Thigh RL7=Right Lateral Thigh LL7=Left Lateral Thigh RPB=Right Posterior Back LFB=Left Posterior Back RUA=Right Upper Arm LUA=Left Upper Arm RB=Right Deltoid LB=Left Deltoid RC=Right Chest LC=Left Chest ABU=Abdomen Hold Codes: RER RZY RPO

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

IN THE MATTER OF:

MOLLY C. WATSON STROUD, R.N.
License No. RN.94424

OIE # 2008-371

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 26, 2010, at 8:30 AM* in Room 108, Kingstree 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:

MOLLY C. WATSON STROUD, R.N.
License No. RN.94424

OIE # 2008-371

Respondent.

MEMORANDUM OF AGREEMENT
AND STIPULATIONS

WHEREAS, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Molly C. Watson Stroud, Respondent; and

WHEREAS, a Complaint has been served and filed, alleging that Respondent has violated S.C. Code Ann. § 40-33-110(A)(5), (13) and (18), and § 40-1-110(f) (1976, as amended). A copy of the Complaint, dated October 6, 2009, is attached hereto and incorporated herein as Exhibit 1.

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, to determine 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 June 3, 2008, while employed at Spartanburg Regional Hospital, Respondent removed two (2) Fentanyl (5mL) ampoules and one (1) Dilaudid (2mg) syringe from the Acudose machine, for a patient. However, one ampoule of Fentanyl is unaccounted for.

- a. Respondent contends that she removed the above-referenced medications during an emergency c-section, at the request of the CRNA in charge, and subsequently gave them directly to the CRNA to administer, without opening or drawing them up into a syringe.
 - b. Respondent contends that she did not chart the medications as administered because she did not administer them and because the CRNA assured her that he would document the chart appropriately.
 - c. Respondent further contends that she did not steal, take, or use the above-referenced medications for personal use.
3. That on or about July 1, 2008, Respondent administered a portion of one (1) Dilaudid (2mg) syringe to a patient and inadvertently took the remaining amount home. Respondent returned the syringe the next day, with a lesser amount of liquid than she took home.
 - a. Respondent submitted to a drug screen on July 2, 2008, which came back negative.
 - b. Respondent contends that a small amount of the liquid had leaked out into the needle cap and collected there and she informed hospital personnel of this.
 - c. Respondent further contends that she did not personally use or administer any portion of the Dilaudid to anyone else.
4. That on or about September 15, 2008, Respondent was evaluated by the SC Recovering Professional Program (RPP) and did not receive a diagnosis for substance abuse or dependency.
5. That on or about January 25, 2008, the Board approved a Consent Agreement, which placed Respondent's license on probation for one year and required that she refrain from violating any license laws. In addition, Respondent agreed that any license law violations would constitute a violation of the Agreement. A copy of the Consent Agreement is attached hereto and incorporated herein as Exhibit 2.

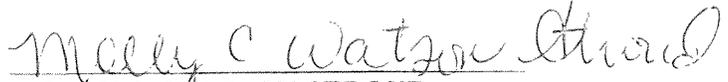
RESPONDENT ADMITS that the aforementioned acts of Respondent present grounds that constitute misconduct.

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.

2/8, 2010


MOLLY C. WATSON STROUD
RESPONDENT

2/8, 2010


WITNESS or ATTORNEY

February 10, 2010


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:

MOLLY C. WATSON STROUD, R.N.
License No. RN.94424

OIE # 2008-371

Respondent.

AMENDED
FORMAL COMPLAINT

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 June 3, 2008, while employed at Spartanburg Regional Hospital, Respondent removed two (2) Fentanyl (5mL) ampoules and one (1) Dilaudid (2mg) syringe from the Acudose machine for a patient, but failed to document that said medications were administered.
- B. That on or about July 1, 2008, Respondent administered a portion of one (1) Dilaudid (2mg) syringe to a patient and took the remaining amount home. Respondent returned the syringe the next day, with a lesser amount of liquid than she took home.



- C. That on or about January 25, 2008, the Board approved a Consent Agreement, which placed Respondent's license on probation for one year and required that she refrain from violating any license laws. In addition, Respondent agreed that any license law violations would constitute a violation of the Agreement.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. § 40-33-110(A)(5), (13), and (18), and § 40-1-110(f) (1976, as amended), in the following particulars:

- A. Respondent has violated § 40-33-110(A)(5) (1976, as amended), in that she has violated a provision of the Nurse Practice Act or a Regulation or Order of the Board, as evidenced by Respondent failing to adhere to the terms of a prior Agreement with the Board.
- B. Respondent has violated § 40-33-110(A)(13) (1976, as amended), in that she has obtained, possessed, administered, or furnished prescription drugs to a person including, but not limited to, one's self, except as directed by a person authorized by law to prescribe drugs, as evidenced by Respondent being in possession of Dilaudid that was not authorized for her.
- C. Respondent has violated § 40-33-110(A)(18) (1976, as amended), in that she failed to keep accurate, intelligible entries in records, as required by law, policy, or standards for the practice of nursing, as evidenced by Respondent's failure to verify and document medication administration.
- D. Respondent has violated S. C. Code Ann. § 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.

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

10 / 06 / 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 & REGULATION
BEFORE THE BOARD OF NURSING

In the Matter of:

Molly C. Stroud, RN

License # 94424

Case#: 2007-389

Respondent

CONSENT AGREEMENT

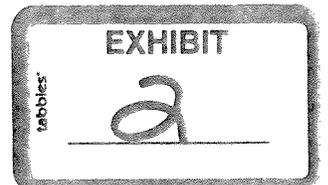
By agreement of the Board of Nursing (the Board) and the above named Respondent, the following disposition of this matter is entered pursuant to the provisions of S.C. Code of Laws. §1-23-320(f) (1976, as amended) of the South Carolina Administrative Procedures Act:

FINDINGS OF FACT

1. Respondent is licensed to practice as a Registered Nurse 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. Respondent admits that in July and August of 2007, while working at St. Francis Hospital in Greenville, South Carolina, she diverted narcotic medications, specifically Stadol, from the facility for her personal use.
3. Respondent enrolled with the Recovering Professional Program and was evaluated by Carolina Center for Behavioral Health and received a negative diagnosis for abuse or dependency. She was discharged from the Recovering Professional Program as not appropriate for services.
4. Respondent waives any further findings of fact with respect to this matter.

CONCLUSIONS OF LAW

Respondent further admits that as a result of the previous admissions herein, Respondent has violated S.C. Code of Laws §40-33-110(A) (1), (3), (10) & (13) (1976, as amended). Respondent waives any further conclusions of law with respect to this matter.



THEREFORE, IT IS ORDERED WITH RESPONDENT'S CONSENT THAT:

1. Respondent's license to practice nursing in the State of South Carolina will be placed in a probationary status for a period of not less than one (1) year from the date of the Board's action on this agreement with the following conditions:
 - a. Respondent's practice shall be strictly limited to a specific setting and location approved in writing in advance by the Board. Respondent must be supervised by a registered nurse (RN) who must remain on site and on shift at all times. Supervision means the process of critically observing, directing, and evaluating another's performance. Respondent shall not be approved to work in a home based healthcare environment, through an agency or as a telenurse. Respondent's access to controlled substances shall be at the discretion of Respondent's Director of Nursing, unless otherwise prohibited under this Consent Agreement. Respondent shall provide a copy of this Consent Agreement, with attachments, and the disciplined license to all employers and educational institutions if pursuing additional nursing education.
 - b. Respondent shall have the employer submit quarterly written reports directly to the Board or its designee for at least one (1) year from the date of employment or this Consent Agreement, if currently employed. During the period of discipline, said reports shall be submitted on or before the tenth day after three months of practice in that setting and every third month thereafter. Said reports shall include assessment of Respondent's professional competency and integrity, commitment to professionalism and applicable standards of practice, and adherence to the terms of the Consent Agreement, until at least one (1) year of satisfactory compliance has been documented.
 - c. Respondent must attend a Board-approved Legal Aspects Workshop and provide written documentation to the Board or its designee within six (6) months from the date of the Board's action on this Agreement.
 - d. Respondent shall pay a Civil Penalty of \$500.00 within (60) days from the date of the Board's action on this Agreement. Said penalty shall not be deemed paid until received by the Board in the form of a money order or cashier's check.
 - e. Respondent shall appear and report to the Board as requested by the Board.
 - f. Respondent shall promptly advise this Board in writing of any changes in address, practice, hospital privileges, professional status, or compliance with this agreement. Correspondence and copies of reports and notices mentioned herein shall be directed to:

LLR-Board of Nursing
Compliance Manager
Post Office Box 12367

2. Respondent agrees that if she fails to meet the conditions agreed to in this Consent Agreement, the Board may immediately suspend Respondent's licenses pending a hearing, which may result in further discipline. Any license law violations by Respondent during any period of probation constitute a failure to meet the conditions of this Consent Agreement.
3. At such time as Respondent petitions for full re-instatement of her license or files a new application, as may be required by law, Respondent will have the burden of proving, among other things, rehabilitation and fitness to re-enter practice unsupervised, and any decision will be in the sole discretion of the Board.
4. Respondent has full knowledge that she has the right to a hearing and to be represented by counsel in this matter, and freely, knowingly, and voluntarily waives such rights by entering into this Consent Agreement. Respondent understands and agrees that by entering into this Consent Agreement she voluntarily relinquishes any right to judicial review of Board action(s) which may be taken concerning any related matters.
5. It is understood and agreed that, in accordance with the Nurse Licensure Compact, Respondent shall not practice nursing in any other party-state without the prior written approval of this Board and satisfactory documentation of prior written authorization from such other party-state.
6. Respondent understands and agrees that this Consent Agreement will not become effective unless and until approved by the Board. Respondent understands and agrees that this Consent Agreement, if approved, will be disseminated as a public action of the Board in the manner provided by law. Respondent understands and agrees that if this Consent Agreement is not approved, it shall not constitute an admission against interest in this proceeding or prejudice the right of the Board to adjudicate this matter.
7. Pursuant to the South Carolina Freedom of Information Act, this Consent Agreement, with attachments, is a public document.
8. This Consent Agreement shall take effect immediately upon receipt by Respondent or her counsel.

AND IT IS SO ORDERED.

SOUTH CAROLINA BOARD OF NURSING

1-25, 2008

Brenda y. Martin
~~Suzanne K. White, RN, MN, FAAN, FCCM, CNAA~~
President of the Board

I CONSENT:

Brenda y martin, RNC, MN, CNAA

Molly C. Stroud, RN
Molly C. Stroud, RN, Respondent

12/10/07
Date

[Signature]
Attorney for the Board

1/28/08
Date

South Carolina Department of Labor, Licensing & Regulation
Before the Board of Nursing

In the Matter of:

Molly Christina Stroud,

RN . 94424 ,

2007-389 Respondent.

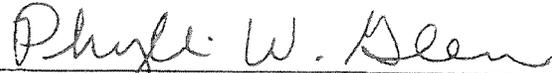
AFFIDAVIT OF SERVICE

PERSONALLY appeared before me Phyllis W. Glenn, who, being duly sworn, states:

1. That she is an Administrative Assistant with the SC Department of Labor, Licensing and Regulation, Office of Investigations and Enforcement.
2. That she hereby certifies that on February 20, 2008, at 11:05 AM she served the Consent Agreement in the above-captioned matter by hand delivering to the following individual at:

Ms Molly Christina Stroud
110 Centerview Drive
Columbia SC 29211

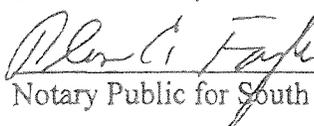
SOUTH CAROLINA DEPARTMENT OF
LABOR, LICENSING AND REGULATION



Phyllis W. Glenn
OFFICE OF INVESTIGATIONS & ENFORCEMENT
P. O. Box 11329
Columbia, SC 29211-1329
(803) 896-4470

SWORN to before me this

20 day of FEBRUARY

 (L.S.)
Notary Public for South Carolina

My Commission Expires: 9-11-2016.

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

In the Matter of:

MOLLY C. WATSON STROUD, R.N.
License No. 94424

OIE #2008-371

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, 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. C. Grant Varner
Varner and Segura
304 Petigru Street
Greenville, SC 29601

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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U.S. Postal Service TM	
CERTIFIED MAIL TM RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ _____
Certified Fee	_____
Return Receipt Fee (Endorsement Required)	_____
Restricted Delivery Fee (Endorsement Required)	_____
Total	_____
Sent To: Mr. C. Grant Varner	
Street, or PO:	_____
City, St:	_____
PS Form 3800, August 2005	

2/19/10
Postmark Here

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

IN THE MATTER OF:

ANNE LYNCH, R.N.
License No. RN.39825

OIE #2009-122

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 26, 2010, at 9:00 AM* 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:

ANNE LYNCH, R.N.
License No. RN.39825

OIE #2009-122

Respondent.

MEMORANDUM OF AGREEMENT
AND STIPULATIONS

WHEREAS, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Anne Lynch, Respondent; and

WHEREAS, a Complaint has been served and filed, alleging that Respondent has violated S.C. Code Ann. § 40-33-110(A)(3), (16), and (18), § 40-1-110(f), and S.C. Code Regs. 91-19(c)(2) (1976, as amended). A copy of the Complaint, dated November 2, 2009, is attached hereto and incorporated herein as Exhibit 1.

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 licensed to practice as a Registered Nurse in South Carolina and is subject to the jurisdiction of the Board.
2. That Respondent, while employed with Amedisys Home Health Care in Mt. Pleasant, S.C., was assigned to care for Patient G.W. (hereinafter "Patient"), an 86-year old wheelchair-bound female diagnosed with chronic lung disease asthma type, congestive heart failure, coronary artery disease, and urinary incontinence. Respondent had been visiting Patient at her home at least once a week for over one year, to care for leg wounds and respiratory problems, per physician's orders.
3. That on or about March 13, 2009, and for approximately one year prior to, Respondent failed to provide documentation in Patient's records that accurately reflected the extent of medical care Respondent provided or was not able to provide Patient during home visits, and which would accurately reflect Patient's current

condition.

4. That on or about March 24, 2009, Patient presented to the Emergency Room of East Cooper Regional Medical Center (ECRMC) in Mt. Pleasant. ECRMC staff found Patient to have advanced gangrene in multiple stage III and IV bedsores. The medical records confirm that Patient was incapacitated, in the fetal position, emaciated, and smelled of fetid flesh. Patient expired in the hospital on March 28, 2009.
5. That Respondent contends and the medical records support that Patient routinely refused to follow through with recommended medical care and refused full body assessments. Respondent contends that she kept Patient's treating physician informed of her treatment of Patient, as well as any limitations or barriers in caring for Patient. A statement from Patient's treating physician, which confirms the same, is attached hereto and incorporated herein as Exhibit 2. A statement from Patient's social worker, which further confirms the same, is attached hereto and incorporated herein as Exhibit 3.

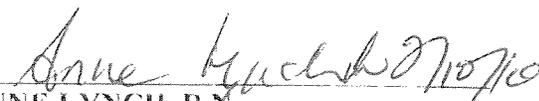
RESPONDENT FURTHER ADMITS that the aforementioned acts of Respondent present grounds that constitute misconduct. Respondent further admits that as a result of the previous admissions herein, Respondent has violated S.C. Code Ann. § 40-33-110(A)(3) and (18) and § 40-1-110(f) (1976, as amended).

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.

_____, 2010



ANNE LYNCH, R.N.
RESPONDENT

February 11, 2010



~~WITNESS OF ATTORNEY~~

February 16, 2010



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:

ANNE LYNCH, R.N.
License No. RN.39825

OIE #2009-122

Respondent.

FORMAL COMPLAINT

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 Respondent, while employed with Amedisys Home Health Care in Mt. Pleasant, S.C., was assigned to care for Patient G.W. (hereinafter "Patient"), an 86-year old wheelchair-bound female diagnosed with chronic lung disease asthma type, congestive heart failure, coronary artery disease, and urinary incontinence. Respondent had been visiting Patient at her home at least once a week for over one year, to care for leg wounds and respiratory problems, per physician's orders. On or about March 13, 2009, and on multiple prior home visits, Respondent failed to provide complete assessments of Patient and failed to provide documentation in Patient's records that accurately reflected Patient's current condition.
- B. That on or about March 24, 2009, Patient presented to the Emergency Room of East Cooper Regional Medical Center (ECRMC) in Mt. Pleasant. ECRMC staff found Patient to have advanced gangrene in multiple stage III and IV bedsores. Among



other things, Patient was incapacitated, in the fetal position, emaciated, and smelled of fetid flesh. Patient expired in the hospital on March 28, 2009.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. § 40-33-110(A)(3), (16), and (18), § 40-1-110(f), and S.C. Code Regs. 91-19(c)(2) (1976, as amended), in the following particulars:

- A. Respondent has violated S.C. Code Ann. § 40-33-110(A)(3) (1976, as amended), 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 failing to provide pertinent information in a patient's records and not providing adequate care to a patient.
- B. Respondent has violated S.C. Code Ann. § 40-33-110(A)(16) (1976, as amended), in that she has omitted, in a grossly negligent fashion, to record information concerning a patient that would be relevant to that patient's condition.
- C. Respondent has violated S.C. Code Ann. § 40-33-110(A)(18) (1976, as amended), in that she has failed to make or keep accurate, intelligible entries in records, as required by law, policy, or standards for the practice of nursing.
- D. Respondent has violated S.C. Code Ann. § 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.
- E. Respondent has violated S.C. Code Regs. 91-19(c)(2) (1976, as amended), in that she failed to demonstrate and apply the knowledge, skill, and care that is ordinarily possessed and exercised by other nurses of the same licensure status and required by the generally accepted standards of the profession. Charges of incompetence may be based upon a single act of incompetence or upon a course of conduct or series of acts or omissions which extend over a period of time and which, taken as a whole, demonstrate incompetence. It shall not be necessary to show that actual harm resulted from the act or omission, or series of acts or omissions, so long as the conduct is such that harm could have resulted to the patient or to the public from the act or omission, or series of acts or omissions.

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

11 / 02 / 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



December 19, 2009

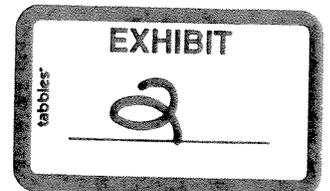
SCDLLR Board of Nursing
Koger Executive Center
110 Centerview Drive
Columbia, SC 29210

Regarding Respondent:
Anne Lynch, R.N. License#: RN39825
SCDLLR-Board of Nursing-OIE#: 2009-122
MKB File#: 12070.1

To Whom It May Concern,

I am a physician practicing internal medicine in Mount Pleasant, South Carolina. I have held a license and practiced in South Carolina since 1996. I am board-certified by the American Board of Internal Medicine. I received a subpoena duces tecum on December 14, 2009. The subpoena was for me and records regarding Geneva Wright to appear for the South Carolina Department of Labor Licensing and Regulation, Board of Nursing on 12/16/09. This hearing has been continued. My office manager has communicated with Henry with the respondent's attorney's office of Moses, Koon and Brackett, PC. The subpoena was verbally rescinded in place of copies of Geneva Wright's (patient) medical records.

I am writing this letter to provide my professional opinion and insight into this particular matter. This letter is unsolicited and uncompensated. I think it is important for the board to have insight into the difficult situation in which Anne Lynch was placed in regards to the care of Geneva Wright. I have never met Anne Lynch in person and have no personal or financial interests whatsoever in regards to Anne Lynch or Amedisys, the homecare agency for which she works. I have had the opportunity to communicate with her from time to time regarding various patients.



I last saw Mrs. Wright on October 17, 2008 with an exacerbation of her congestive heart failure. She was taken by EMS from my office to the Medical University Hospital for treatment of her congestive heart failure. I understand that Mrs. Wright was found unresponsive on March 24, 2009 and was sent to East Cooper Hospital where she died March 28, 2009. I am told that she was found to have stage III and IV bed sores and therefore her case was referred to the South Carolina Department of Labor, Licensing and

Regulation Board of Nursing. It is my understanding that this has resulted in a hearing regarding Ann Lynch, RN.

I first met Geneva Wright, the patient, on December 29, 2003. She has been a patient in this practice since approximately April, 1999. Mrs. Wright was 85 years old when she passed away. She lived by herself, but had help with her care and ADLs from her family. She suffered from congestive heart failure with an ejection fraction of less than 20% with moderate mitral insufficiency, asthma, hypertension, and anemia. She was competent in making her own decisions. She strongly exercised her right of autonomy and self determination in regards to her medical care. When you review her chart from my office you will see that there are a multitude of comments regarding her noncompliance with directions for medical care. She often would not let me do a complete evaluation of her where I could feel most comfortable treating her medical condition. She would refuse also recommendations for testing, follow-up and use of medications. At one point in time, before I started seeing her, one of Carolina Family Care physicians discharged her from the practice because of noncompliance with recommendations of care. She would not let me assess her skin integrity and mainly would allow me to listen to her chest and evaluate for lower extremity edema.

None of this is meant to construe Ms. Wright was a bad person or did anything wrong. Ms. Wright was the sole director of her medical care and usually did not want to participate or interact with the medical community. I believed Ms. Wright to be competent to make decisions and therefore I never pushed for a competency evaluation.

Ms. Lynch tried to provide exemplary medical care for Ms. Wright, but Ms. Lynch could not make Ms. Wright agree to evaluations, such as skin and whole body checks, against her will. Oftentimes, Mrs. Wright would turn away nurses, physical therapist and social workers at the door and not let them in for evaluation. When a social worker was able to assist her, she would accept Meals on Wheels, but no other community care services or senior care services. Even if one doesn't agree with Ms. Wrights' decision to avoid medical care, she still had the right of self-autonomy which had be respected as long as she was competent, which she was.

It is my medical opinion that Ann Lynch did not contribute in any way to Geneva Wright's bedsores or her decompensation which landed her in the emergency room. I believe Ann Lynch went above and beyond what was called for in this particular situation as she would call our office to keep us informed of what was happening with Ms. Wright and any limitations or barriers in care that she ran into. I would hope the Board of

Nursing strongly considers the barriers thrown up before Ann Lynch in her care of Geneva Wright. I found no evidence whatsoever of neglect in any fashion.

If you should need any further information, please do not hesitate to call me at (843) 884-6653.

Sincerely,

A handwritten signature in black ink, appearing to read "John W. McDonald". The signature is fluid and cursive, with the first name "John" being the most prominent.

John W. McDonald, MD
Clinical Associate Professor of Medicine

CC:

Jocelyn T. Andino
Assistant General Counsel
SCLLR-Office of General Counsel
PO Box 11329
Columbia, SC 29211-1329

Ms. Anne Lynch, RN
971 Governors Road
Mount Pleasant, SC 29464-9228

Paul D. de Holczer
Moses Koon & Brackett, PC
1333 Main Street, Suite 650
PO Box 100261
Columbia, SC 29202-3261

Amedisys Home Health Care

November 13, 2009

To Whom It May Concern:

I'm writing on behalf of Ann Lynch, RN, the nurse assigned to the case of Ms. Geneva Wright last year. I was the social worker on the case and worked with Ms. Wright and Ann for almost two years. We were all saddened with the outcome of this case, but I believe Ann and I did everything within our power to help this family.

Ms. Wright and her son lived in a dilapidated trailer in conditions of extreme poverty. I had exhausted every option with Ms. Wright and was only able to interest her in finding a way to change her living situation when I assured her she would be helping her son by helping herself. I never felt there was any neglect present. I never once thought to call DSS Adult Protective Services. Ms. Wright was very clear with her wishes and staying in her trailer was at the top of her list. DSS would have merely recommended placement, an issue I'd already exhausted.

I was the last person to see Ms. Wright before Ann found her in such a deplorable condition. To my recollection, I saw her on a Thursday, and Ann had her admitted to East Cooper Hospital the following Tuesday. I remember that visit well because I've run it through my mind many times since discovering Ms. Wright was hospitalized.

On the day of my last visit, Ms. Wright was in good spirits. I had been working with her and her son Ronald on procuring a new trailer through the United Methodist Relief Center. She had been on the waiting list for over a year and was very hopeful her new trailer was coming soon. In fact, it seemed everything hinged on this new trailer. Ms. Wright adamantly refused to go into a facility, she refused Community Long Term Care Services, and she even refused to go on oxygen until she could settle into her new home. It took us over a year to complete the long application for Methodist Relief – particularly because Ms. Wright had never had an ID and she had never requested a copy of her birth certificate. This took six months and a letter to the director at DHEC to release her birth certificate without an ID (the DMV would not issue an ID without a birth certificate.)

Everything was falling into place the week I last visited Ms. Wright. I think I had to get her to sign another update on her application. I also reminded her I would be doing an application for CLTC the minute she found out when her new trailer was coming. She reported she was feeling fine and was looking forward to having more space and a nice, clean, new kitchen. She showed no signs of physical decline. She was able to take my computer for signing – I'm not sure of the approximate weight, but it had to have weighed over six pounds. Nonetheless, she was able to

Amedisys Home Health Care

take the computer with one arm, place it in her lap, and sign. I did not smell any feces or urine, and I was sitting literally less than a yard from her wheelchair. The refrigerator was not odorous, either. It was a typical visit like many I'd been through before – nothing was out of the ordinary. I certainly would have called Ann if I'd suspected anything. Ms. Wright's son Ronald was also used to calling me when various items would arrive in the mail. He could have contacted me at any time – and had done so many times throughout the past two years.

Ms. Wright's gangrene must have come quickly as Ann found her only five days since I saw her. It would be accurate to assume that Ronald must have noticed something was wrong with his mother, but this assumption would be made without knowing the family dynamics. Ms. Wright always sat in her wheelchair next to a sofa. Ronald sat only feet away in another chair so he could be ready to help Ms. Wright if she needed to get to the back of the trailer. Ronald is hard of hearing and would typically irritate Ms. Wright asking her to repeat information. I can see Ronald asking Ms. Wright if she were all right that weekend, but her snapping at him to leave her alone and "mind your business" as she would frequently blurt. Ronald probably sat there through the refrigerator rotting and Ms. Wright's incontinence, afraid to utter a word after being scolded for bothering Ms. Wright.

In any case, I assure you nothing was out of the ordinary the Thursday I visited. I'm sure Ann must have been wondering about my abilities when she walked in that Tuesday. However, it was Ann's normal Tuesday visit, and without any suspicious reports from me or calls from the family, she would not have known all that was going on in that house.

I have never seen Ann perform in any situation without the utmost professionalism. She is very consistent with calling in social work to assess the situation to make sure every avenue for care has been exhausted. I have never questioned her judgment or felt uncomfortable about calling her for advice about any of our mutual patients. What happened to Ms. Wright is definitely unfortunate, but Ann couldn't have done anything differently - and hadn't for the past two years.

I have no reservations in commenting that Ann Lynch is an extremely competent, professional, and caring home health nurse. It is a rare individual who can perform this front-line work and not quickly burn out and/or become repulsed by seeing people in seemingly horrible conditions. It also saddened me to see Ann have to go through an investigation questioning her competency when she was a mere piece of a puzzle of family dynamics that continued for years. Again, I state with no reservations, Ann Lynch is one of most competent home health nurses I've encountered.

Sincerely, 
William A. Roberts, LISW

Respondent's Evidence in Mitigation of a Sanction

Anne Lynch, RN

OIE # 2009-122

BOARD:
Paul C. Aughtry, III
Chairman
Edwin H. Cooper, III
Vice Chairman
Steven G. Kisner
Secretary



C. Earl Hunter, Commissioner

Promoting and protecting the health of the public and the environment

BOARD:
Henry C. Scott
M. David Mitchell, MD
Glenn A. McCall
Coleman F. Buckhouse, MD

MR. PAUL D. DE HOLCZER
MOSES KOON & BRACKETT, PC
1333 MAIN STREET
SUITE 650
COLUMBIA, SC 29201-

02/04/2010

Request Number : 0912097

RE: ANNE LYNCH, RN-LICENSE NO.: RN.39825
SCDLLR-BOARD OF NURSING- OIE NO.: 2009-122
MKB FILE NO.: 12070.1

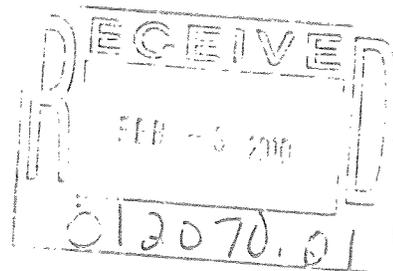
DEAR MR. DE HOLCZER

PLEASE FIND ENCLOSED THE INFORMATION THAT YOU REQUESTED
AS PROVIDED BY THE FREEDOM OF INFORMATION ACT.

PLEASE NOTE THAT THERE IS NO CHARGE FOR THIS INFORMATION.

IF YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CONTACT
THE FREEDOM OF INFORMATION CENTER AT (803) 898-3882

THANK YOU.



950 Houston Northcut Blvd S/W
MH

File
closed
7/20

COMPLAINT ROUTING SLIP

ACTION SUSPENSE RESOLVED

MMO CCO-2 FSO

Complaint # V03049 Computer # 210901913 Facility Ambridge Home

Health ^{NO} Charlotte

Name Date Initials
Randall 3/26/09 RE
~~Everette W.~~

ROV _____ _____

Chris Stephens 03-26-09 C

Theresa 4-6-09 TH

~~_____~~ 04-17-09 C
closed 04-06-09

Joe R
MF

COMMENTS:

Note: This one needs to be done week of 03-30-09.
C

MF Copy

CONFIDENTIAL

April 6, 2009

Rikki Moye - Director of Case Management
East Cooper Regional Medical Center
1200 Johnnie Dodds Blvd
Mt. Pleasant, South Carolina 29464

Re: Amedisys Home Health of N. Charleston

Complaint: # 03049-09

Dear Ms. Moye:

On April 1, 2009, a representative from the Division of Health Licensing received a complaint involving Amedisys Home Health of N. Charleston. As authorized by State Certification of Need and Health Facility Licensure Act: S.C. Code Ann. §44-7-315 (Supp. 2008), your complaint and our findings are below.

Your complaint involved a patient that had been under the care of the facility and was admitted to the ER with gangrene and covered with stage 4 decubitus.

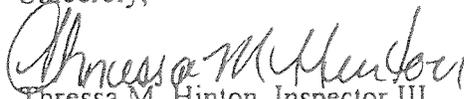
The investigation included, but was not limited to, a review of the patients chart as well as interviews with staff. Documentation in the chart reflected that the appropriate treatment and care was being accomplished according to the Care Plan for this individual.

As a result of this investigation, no violations to Regulation 61-77, Standards for Licensing Home Health Facilities were found or cited at this time.

Please know that Amedisys Home Health of N. Charleston will be scheduled for future unannounced inspections, and will continue to be monitored for compliance with licensing standards.

Should you have further questions or concerns, please call me at 803-545-4050.

Sincerely,


Thressa M. Hinton, Inspector III
Facilities and Services Office
Division of Health Licensing

ROC/tmh



Licensing Standards Compliance Report
Division of Health Licensing

Date: 04/01/09

Licensed As: MMA-0172

Inspection Type: Initial [I] Follow-up [FU] to report dated: ___/___/___
 General Inspection [G] Food/Sanitation [FS] Fire/Life Safety [FL] Consultation [CS]
 Complaint Investigation [CI] Number (s) #03049-09 On-Site: Yes No

To: Ms. Jenny Slaughter, Administrator of
Amedisys Home Health of North Charleston NA, NA
(Name of Activity) (licensed capacity / census)

This inspection/investigation was conducted by: Theresa Minton

If applicable, attached is a detailed description of the conditions, conduct or practices that were found to be in violation of requirements. This inspection or investigation is not to be construed as a check of every condition that may exist, nor does it relieve the licensee from the need to meet all applicable standards, regulations and laws.

The South Carolina Code of Laws requires this Department to establish and enforce basic standards for the licensure, maintenance, and operation of health facilities and services to ensure the safe and adequate treatment of persons served in this State. It also empowers the Department to require reports and make inspections and investigations as considered necessary. Furthermore, the Code authorizes the Department to deny, suspend, or revoke licenses or to assess a monetary penalty against a person or facility for (among other reasons), violating a provision of law or departmental regulations or conduct or practices detrimental to the health or safety of patients, residents, clients, or employees of a facility or service.

If applicable to the type of report being made, the signature of the activity representative indicates that all of the items cited were reviewed during the exit discussion.

Theresa Minton
(DHEC Team Representative sign)

[Signature]
(Activity Representative sign)

Within 15 days (NA), complete this report, sign the administrators certification at the bottom of this page, retain the third copies for your records and mail the original copies of this report, including this page, to:

South Carolina Department of Health & Environmental Control
Division of Health Licensing
2600 Bull Street
Columbia, SC 29201-1708

No Violations
No Reply Required

Administrators Certification

I certify that I have described in the appropriate places of this report:

- (1) the actions taken to correct each cited deficiency,
- (2) the actions taken to prevent similar recurrences, and
- (3) the actual or expected completion dates of those actions.

Jenny Slaughter, Administrator [Signature] 4/1/09
(Facility Administrator: name, title, signature, date)

Disposition of copies of all pages: Original - Facility returns to DHEC with description of corrective actions. Copy 1 - DHEC suspense. Copy 2 - Retained by Facility.

Complaint # 03049-01



ATTACHMENT TO SUPPLEMENT
Licensing Standards Compliance Report
Division of Health Licensing

CONFIDENTIAL
 Yes No

This attachment names or identifies individuals related to cited violations. If you identify by name any patient, client, resident, staff member (other than the administrator or administrator's representative), you must check yes by confidential at the top of this form. Otherwise, check no.

Page: 1 of 1

Activity: Amedys Home Health of N. Charleston

Date: 04-01-09

Item

Individual or Records Described

Geneva Wright

Disposition of copies of all pages: Original - Facility returns to DHEC with description of corrective actions. Copy 1 - Retained by Facility.



SUPPLEMENT TO:
Licensing Standards Compliance Report
Division of Health Licensing

Page: 1 of 1

Activity: Amedisys Home Health of N. Charleston Date: 04-01-09

Standards contained in sections of Regulation 61-~~77~~ were Not Met as indicated below. Please state corrective action taken or plan to be taken in space below statement of violation cited, and return this form. Do not identify any patient, client, resident, or staff member (other than the administrator) by name on this form.

Item/Section/Class Description/Corrective Action taken to correct and prevent recurrence and date of completion

A complaint that was received in this office on March 25, 2009 was investigated. The complaint involved the following:

A patient that had been under the care of the facility was admitted to the ER with gangrene and covered with stage 4 decubitus.

In order to investigate this complaint an unannounced visit was made and the patient's chart was reviewed.

The chart had documentation stating that the client had a wound on her leg. The facility contacted the physician on the day the wound was noticed, 02-02-09, and again on 02-05-09 and 02-06-09.

The physician provided the facility ~~and~~ ^{with a} the physician's orders, ^{and they} were carried out correctly. As a result of the inspection, no violations were found or cited at this time.

Disposition of copies of all pages: Original - Facility returns to DHEC with description of corrective actions. Copy 1 - DHEC suspense. Copy 2 - Retained by Facility.

COMPLAINT

EFIS Incident #: *200901973* License #: HHA - 0191 (District Log No.) Complaint #: 03049

Date Received: 03/25/09 Time: 1:00pm Received: Telephone

Facility: Amedisys Home Health ^{of North} Charleston (Capacity: 3) Program :
Facilities Services

Street Address: 2675 Lake Park Drive City: North Charleston County: Charleston

Administrator: Jenny Slaughter Phone #: (843) 5531263

Recorded By: R Clark Resident/Client/Patient Name: Geneva Wright

Provider Status: UNKNOWN

Other: *No Violations*

SUBJECT	ALLEGE	CITE
ABUSE	<input type="checkbox"/>	<input type="checkbox"/>
ACCESSIBILITY	<input type="checkbox"/>	<input type="checkbox"/>
ACTIVITIES	<input type="checkbox"/>	<input type="checkbox"/>
ADMINISTRATIVE	<input type="checkbox"/>	<input type="checkbox"/>
ANIMALS	<input type="checkbox"/>	<input type="checkbox"/>
BACKGROUND CHECKS	<input type="checkbox"/>	<input type="checkbox"/>
CARE PLANS	<input type="checkbox"/>	<input type="checkbox"/>
CHARTING/RECORDS	<input type="checkbox"/>	<input type="checkbox"/>
DIETARY/FOOD	<input type="checkbox"/>	<input type="checkbox"/>
DIRTY NEEDLES	<input type="checkbox"/>	<input type="checkbox"/>

SUBJECT	ALLEG E	CIT E
DUMPING	<input type="checkbox"/>	<input type="checkbox"/>
FINANCES	<input type="checkbox"/>	<input type="checkbox"/>
FIRE CODES	<input type="checkbox"/>	<input type="checkbox"/>
HOUSEKEEPING	<input type="checkbox"/>	<input type="checkbox"/>
INCIDENT REPORTS	<input type="checkbox"/>	<input type="checkbox"/>
LEVEL OF CARE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
MAINTENANCE	<input type="checkbox"/>	<input type="checkbox"/>
MISAPPROPRIATIONS	<input type="checkbox"/>	<input type="checkbox"/>
RECREATION STAFF	<input type="checkbox"/>	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	<input type="checkbox"/>

SUBJECT	ALLEGE	CITE
OXYGEN	<input type="checkbox"/>	<input type="checkbox"/>
PATIENT RIGHTS	<input type="checkbox"/>	<input type="checkbox"/>
PHARMOCOLOGICAL	<input type="checkbox"/>	<input type="checkbox"/>
QUALITY PROGRAM	<input type="checkbox"/>	<input type="checkbox"/>
SAFETY	<input type="checkbox"/>	<input type="checkbox"/>
STAFF	<input type="checkbox"/>	<input type="checkbox"/>
STAFF TRAINING	<input type="checkbox"/>	<input type="checkbox"/>
TB REQUIREMENTS	<input type="checkbox"/>	<input type="checkbox"/>
UNLICENSED	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

Program: fso Investigation Initiated: *4-1-09* ROV Completed: *4-1-09* ROV Received: *4-1-09* Closed Review: *4-6-09* Complaint Letter: *4-6-09*

Description of Problem:

The patient was admitted to East Cooper Hospital through the ER. The patient has been receiving care and services from Amedisys and Amedisys should have been attending to the patient's wounds. The patient has gangrene and her body is covered with stage 4 decubitus. These are old wounds. Looks like the worst case of neglect the complainant has ever seen. The son of the patient is mentally disabled and does not have the ability to understand his mother's condition. The patient will likely die from the wounds. The nurse providing care through Amedisys is Ann Lynch.

Specific Concerns (Regulatory Issues):

CONFIDENTIAL

Complainant attempted resolution with Activity? Yes No
If so, with Whom?

Complainant Name: Ms. Rikki Moye, Director of Case Management, East Cooper Regional Medical Center

Address: 1200 Johnnie Dodds Blvd.
City, State, Zip: Mt. Pleasant, SC 29464
Telephone: 803 831 1101

Comments/Actions:

Confidential

To Paul De Hozyer

From Bruce Lynch

803461 2309



Anne.
Has always giving your Best!
C. Main

Ann,
Thank you for
everything you do toward
the future. Keep up
the great work.
Bill

Sept. 24, 2007

Anne -

You are an amazing
nurse - one that goes
above and beyond the
call of duty to take care
of her patients. Your
efforts have a tremen-
dous ripple effect on
our referral sources.
Please keep up your
outstanding work - you're
an example to all of
us!

Bill



Employee Performance Evaluation Form

EMPLOYEE INFORMATION

Name: Anne Lynch Emp #: Click here to enter ee#
 Job Title: Case Manager Date: 2/3/2010
 Review Period: 10/16/2008 To 10/16/2009 Manager: Denise Grimm,RN

Responsibility Area/Performance Criteria	Sum of Performance Ratings for each responsibility area (refer to job description)	Number of Items in Responsibility Area (count each line item in job description)	Average Score for each Responsibility Area (A/B)	Weight of Responsibility Area – (obtain from job description)	Performance Rating Points (C*D)
1. Job Duties/Knowledge	34	10	3.4	30%	1.02
2. Job Performance	13.5	4	3.375	20%	0.675
3. Mission/Agency Standards	14	4	3.5	20%	0.7
4. Team/Communication Skills	12.5	4	3.125	20%	0.625
5. Personal/Professional Development	10.5	3	3.5	10%	.35
6. Problem Solving	6.5	2	3.25	10%	0.325
7. Leadership	n/a	n/a	n/a	n/a	n/a
Overall Performance Rating Score (Sum of all rating points in Column E)					3.69

PERFORMANCE RATING SCALE FOR RESPONSIBILITY AREAS (Ratings in Column B)

LEVEL 4 – Performance EXCEEDS Expectations – Employee performance consistently exceeds the criterion. Proven examples of superior performance.

LEVEL 3 – Performance fully MEETS Expectations – The employee performs within the criterion.

LEVEL 2 – Satisfactory Performance with ROOM FOR IMPROVEMENT – The employee performs fairly well within the criterion. However, improvements are necessary as identified areas. Performance improvement plan is required.

LEVEL 1 – Performance is UNACCEPTABLE – The employee is functioning at an unacceptable level. Specific time-based corrective action is initiated for any level 1 rated, and may include disciplinary action.

OVERALL PERFORMANCE RATING SCALE (Sum of all rating points in Column E)

- 3.6 to 4.0 Performance EXCEEDS Expectations
- 2.6 to 3.5 Performance MEETS Full Expectations
- 1.6 to 2.5 Satisfactory Performance with ROOM FOR IMPROVEMENT
- 1.5 and below UNACCEPTABLE Performance

ACTION RECOMMENDED

- Salary increase – 3% %
- Re-evaluate in days



Introductory period satisfactorily completed.

STRENGTHS & AREAS FOR DEVELOPMENT IN EACH RESPONSIBILITY AREA/PERFORMANCE CRITERIA

Job Duties/Knowledge: Anne has many years of home health experience and has exceptional clinical skills. She is attentive to her patient's needs and provides thorough patient/caregiver education. She is very flexible and readily adjusts her schedule to meet the patient needs and or agency, such a being on-call or assisting other nurses with their caseloads. She seeks guidance when appropriate from her clinical managers, and also keeps other disciplines informed of pertinent case communication for coordination of patient care.

Job Performance: exceeds expectations

Mission/Agency Standards: meets expectations

Communication Skills: meets expectations

Personal/Professional Development: meets expectations

Problem Solving: meets expectations

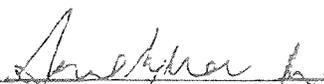
Leadership: meets expectations

Major Strengths: clinical skills,caregiver teaching,self-directed/requires minimal supervision

Achievements (certifications, education, etc.): Click here to enter text.

Mutual Goals: Click here to enter text.

Employee Comments:

Employee Signature 

Date 3/2/10

Employee signature does not indicate agreement. Signature indicates acknowledgement and receipt of evaluation only. Must be signed by employee.

Manager Signature 

Date 2/3/10

Ann

CASE MANAGER

Responsible to
Director of Office Operations and/or Clinical Manager

Directly Supervises and Evaluates
Home Health Aides and Licensed Practical Nurses/Vocational Nurses

Description

Works under the supervision of the DOO/CM and provides comprehensive case management to patients and their families. Will develop, implement, coordinate and evaluate patient care plans according to physician's orders as allowed by their scope of practice.

JOB DUTIES/KNOWLEDGE (30%)

- 3.5 1. Provides skilled nursing care to patients in accordance with the Plan of Care and agency policies.
- 3.0 2. Performs patient care assessments implementation and evaluation. Completes OASIS assessments timely, accurately and according to OASIS user's manual definitions. Implements appropriate nursing clinical tracks and monitors the progress of field staff participating in patient care for their caseload.
- 3.5 3. Helps to achieve and maintain continuity of patient care by communicating information effectively and systematically with individual staff, physicians, family members and community resources. Interdisciplinary communication and follow up. Initiates appropriate referrals when indicated. Care coordination on caseload from admission to discharge.
- 3.5 4. Promotes and maintains patient health through teaching and appropriate rehabilitative measures. Assists patients in learning appropriate self-care techniques.
- 3.5 5. Supervision of caseload including LPN's and Home Health Aides. Care coordination with PRN staff when care is provided for caseload. Provides clinical episode management according to Amedisys protocols including overseeing clinical tracks and outcomes. Ongoing communication with clinical manager regarding individual case load.
- 3.5 6. Initiates, plans and provides staff education and performs competency and skills validation for staff as needed. Demonstrates competency in skills required for client care.
- 3.0 7. Adheres to agency infection control and safety policies, including

education, reporting, and practice implementation specific to job position.

- 3.5 8. Keeps abreast of nursing trends and knowledge.
- 3.5 9. Participates in Team/Case Conferences. Leads discussion on multidisciplinary cases as appropriate on a weekly basis.
- 3.5 10. Performs other duties as assigned or requested by supervisor.

State Specific JOB DUTIES/KNOWLEDGE

Arizona State Specific:

RN will assess condition and report immediately to physician and will document communication on a clinical note or physician order as indicated.

JOB PERFORMANCE (20%)

- 3.5 1. Demonstrates initiative and skills in planning and organizing work. Cooperates with scheduling requests to meet agency needs.
- 3.5 2. Demonstrates a desire to set and meet objectives and to find increasingly efficient ways to perform tasks. Completes work with accuracy and within agency time frames. Is flexible to changes in duties and responsibilities.
- 3.5 3. Requires minimal supervision and is self directed.
- 3.0 4. Adheres to agency infection control and safety policies, including education, reporting and practice implementation specific to job position.

MISSION/AGENCY STANDARDS (20%)

- 3.5 1. Demonstrates organizational awareness and commitment by promoting the agency mission and core beliefs.
- 3.5 2. Protects, honors and respects patient and co-worker's confidentiality and right to privacy.
- 3.5 3. Observes punctuality, attendance and attire policies. Complies with all other related policies, procedures and requests.
- 3.5 4. Conserves agency resources, protects agency property and equipment.

COMMUNICATION SKILLS (20%)

- 3.0 1. Demonstrates interpersonal understanding and utilizes effective

communication skills. Demonstrates respect, patience and understanding in interactions with others. Recognizes and respects cultural and ethnic diversity and influence.

- 3.0 2. Written and verbal communication is expressed clearly and in a cooperative manner. Utilizes appropriate phone etiquette.
- 3.0 3. Exhibits behaviors of cooperation as evidenced by cooperative and collaborative work efforts.
- 3.5 4. Recognizes when others are in need of information, assistance or direction and offers and provides help.

PERSONAL/PROFESSIONAL DEVELOPMENT (10%)

- 3.5 1. Participates in continuing education and personal/professional development activities. Attends agency provided in-service programs to fulfill requirements of position and agency policies.
- 3.5 2. Maintains licensure, personnel file information and personal health status requirements in relation to job position.
- 3.5 3. Sets own development challenges and volunteers to learn.

PROBLEM SOLVING

- 3.5 1. Uses knowledge, experience and other resources to make logical decisions and solve problems.
- 3.0 2. Analyzes work processes and makes suggestions for improvements.

QUALIFICATIONS (Required)

1. Current and unencumbered license to practice as a Registered Nurse specific to that state the employee is assigned to work by the company.
2. **Nurse Licensure Compact (NLC)** documents the following: The mutual recognition model of nurse licensure allows a nurse to have one license (in his or her state of residency) and to practice in other states (both physical and electronic), subject to each state's practice law and regulation. Nurses must legally reside in a NLC state to be eligible to have a multi-state license. *See list of Nurse Licensure Compact States*
3. Minimum of one year (1) of clinical experience as a nurse.
4. Current BCLS certification.
5. Demonstrated knowledge of the appropriate skills for communicating with individuals of all ages. Excellent

- interpersonal skills including verbal and written communication skills.
6. Demonstrates knowledge of Federal/State rules and regulations, ACHC standards, and other regulatory requirements.
 7. Valid Driver's License.
 8. Reliable transportation and agency required liability insurance.
 9. Must be familiar with general use and functions of the computer, such as, user names and password concepts; internet; e-mail; navigation of computer desktop, including starting programs, using files, and windows, effectively use navigation buttons and tool bars; ability to self-manage online HR services and online training programs.

State Specific-QUALIFICATIONS

Illinois State Specific

1. *Is a graduate of an accredited school of professional nursing, BSN preferred.*
-

DEGREE OF TRAVEL

Home visits. Periodic office meetings.

DEGREE OF DISRUPTION TO ROUTINE, OVERTIME

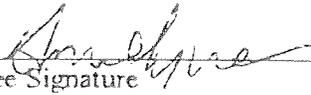
Must be able to adapt to patient needs and schedules changes. Possible on-call responsibilities.

SAFETY HAZARDS IN JOB

Possible infections from patients. Possible auto accidents. Possible unsafe neighborhoods.

I have read and do fully understand this job description.

Employee Signature



Date



JOB TITLE: Case Manager

PHYSICAL DEMANDS	NEVER	OCCASIONALLY	FREQUENTLY	CONTINUALLY
Sit			X	
Stand			X	
Walk			X	
Bend/Stoop			X	
Squat			X	
Crawl		X		
Climb		X		
Reach above Shoulder Level		X		
Kneel		X		
Balance		X		
Lift, Carry, Push, Pull				
Maximum 10 Lbs.			X	
Maximum 20 Lbs.			X	
Maximum 50 Lbs.			X	
Maximum Over 50 Lbs.			X	
Must Be Able To				
See				X
Hear				X
Speak				X
Use One Hand				X
Use Both Hands				X
Environmental Conditions	NEVER	OCCASIONALLY	FREQUENTLY	CONTINUALLY
Involves Being				
Inside				X
Outside		X		
Exposed to Temperatures of				
32° F and less		X		
100° F and more		X		
Wet & Humid		X		
Noise, Vibration		X		
Fumes, Dust		X		
Hazards, Exposure	NEVER	OCCASIONALLY	FREQUENTLY	CONTINUALLY
Infectious Waste			X	
Toxic Chemicals			X	
Needles/Body Fluids			X	
Radiation		X		
Chemotherapeutics		X		

Occasionally = 1% to 33% of the time Frequently = 34% to 66% of the time Continually = 67% to 100% of the time

2007 CAREGIVER OF THE YEAR AWARD

Complete, print, and fax this form, along with supporting documentation, to the Marketing Department (225-295-9690).



Service Is Our Passion

The Caregiver of the Year Award will be presented to an Amedisys health care professional who has the utmost respect for patients and their families; positively influences patients and families; promotes patient independence; demonstrates sterling observation skills; has knowledge of patient care and competency in personal care skills; proves to be flexible toward assignments; and functions as a contributing member of the home care team to achieve positive outcomes. Award nominations are due to Marketing via fax: 225-295-9690 by January 11, 2008.

The Caregiver of the Year winner will receive:

- An all expense paid trip to Rosen Shingle Creek in Orlando, FL for the awards presentation (with a guest)
- A press release issued to hometown newspapers and other media
- A feature story in "The Weekly Spirit" and the employee newsletter
- A commemorative gift

NOMINATION APPLICATION

Nominee's name:

Anne Lynch

Agency:

Mt. Pleasant, SC 2209

Nominee's position within the company

Skilled Nurse

Nominee's cell phone number:

678-467-4684

Agency address:

950 Houston Northcutt Blvd, Ste 105
Mt. Pleasant, SC 29564

Agency phone number:

843-972-0416

Total years nominee has been employed as a health care professional:

> 25 years

Dates of nominee's employment with Amedisys:

June 17, 2003

Nominee's supervisor:

Bonnie Hasey, CMA

Name and location of person submitting this nomination:

Name: Will Mayer

Location: 2209 - Mt. Pleasant, SC

Signature of person submitting this nomination:

Please attach supportive documentation as necessary, such as letters of commendation from patients, co-workers and supervisors. Do not submit performance evaluations, service records or video tapes to support your nomination.

Nominations should be faxed to 225-295-9690 by January 11, 2008.

January 11, 2008

Anne Lynch embodies the Amedisys Spirit. As a skilled nurse in the Mount Pleasant, SC location, she has been a powerful example to our patients, our team members, and our referral sources. She is certainly an outstanding candidate for the Caregiver of the Year Award.

Her devotion to our patients and their families, as well as to the Amedisys team shows daily in her work ethic, as well as in her clinical skills. She has been a mentor to our newest clinical members in a growing office, and she travels daily to the most remote and poorest areas in our county to give care. Perhaps the most special quality she demonstrates is the competence to evaluate any home care situation and get our patients what they need to improve their quality of life, and gain back their independence. There are numerous examples that could bring these attributes to light, but one really stands out.

Anne was assigned to a patient that had only been to the doctor once in the last three years. The woman lived alone with her mentally handicapped son in a trailer that was literally falling apart and heated by kerosene. The patient's health had been rapidly declining, with severe congestive heart failure complicated by increasing fluid gains and the need for diuretic adjustments. The physician was exasperated with the patient's noncompliance and could no longer prescribe the medication that the woman needed. He wanted us to do whatever we could to help her. Anne stepped up to the task. After communicating with the physician, Anne was able to get vital lab tests ordered and help stabilize a progressively declining clinical situation. Anne also knew this patient was in need of a physician's help. After weeks of persistence, she actually convinced this woman to see her doctor, and even made the appointment for her. Of all the healthcare professionals this patient had encountered, none had been able to accomplish this task. Then, on her day off, Anne drove the patient and her son to the physician's office and stayed with them until the appointment was completed. Anne also enlisted the help of our social worker to begin multiple arrangements for fixing the home. Today, this patient is in better health, and is eligible to receive a new home. Her quality of life is so much better because of Anne's compassion, persistence, and attention to detail.

In summary, Anne Lynch demonstrates all the qualities that a star member of the Amedisys team should have. She is an invaluable member of our team, and her efforts continue to help move us to the forefront of what compassion and skill can do for our patients and our company.

Sincerely,



Will Mayer
Account Executive
Mount Pleasant, SC

January 4, 2008

Anne Lynch has proven to be one of the most reliable and cooperative clinicians that we have on our Mount Pleasant team. Numerous times, she has been flexible and accommodating to see patients on short notice, making changes to her already full schedule. She is highly experienced, self directed, and goes above and beyond to maintain continuity of patient care while focusing on positive outcomes. Perhaps Anne's greatest quality is that she truly believes in empowering her patients to make the changes necessary to improve their lives. She is compassionate and an excellent listener, two virtues all clinicians should possess. Overall, she respects others and treats them as she would want to be treated. I believe Anne Lynch is a model Amedisys employee. She is a priceless member of our team, and definitely a perfect candidate for Caregiver of the Year.

Sincerely,



Connie Clark
Director of Operations
Mt Pleasant, SC

Amedisys Home Health Care



950 Houston Northcutt Blvd. Suite 105 · Mt. Pleasant, SC 29464
Phone: 843-972-0416 · Fax: 843-972-0421
www.amedisys.com

FAX TRANSMITTAL:

DATE: 2/25/10 NUMBER OF PAGES: 3 (including cover)

TO: Lisa Thomas

COMPANY: lthomas@hsblawfirm.com

FAX #: 722-2266

FROM: Connie Clark, Director of Operations

PHONE: 843-972-0416

FAX #: 843-972-0421

COMMENTS:

NOTICE—PRIVILEGED & CONFIDENTIAL COMMUNICATION—The attached communication contains privileged and confidential information. If you are not the intended recipient, DO NOT read, copy, or disseminate this communication. Non-intended recipients are hereby placed on notice that any unauthorized disclosure, duplication, distribution, or taking of any action in reliance on the contents of these materials is expressly prohibited. If you have received this communication in error, please destroy all pages and contact the sender at 1-800-467-2662 or the Amedisys Privacy Hotline at 1-866-519-6684.

950 Houston Northcutt Blvd., Suite 105 • Mt. Pleasant, South Carolina 29464
Phone: 843.972.0416 • Toll Free: 866.972.0416 • Fax: 843.972.0421
amedisys.com

Amedisys Home Health Care

February 25, 2010

South Carolina Board of Nursing
PO BOX 12367
Columbia, SC 29211-2367

I am writing this letter on behalf of Anne Lynch, RN. I am the Director of Operation at Amedisys Home Health of Mt. Pleasant, SC and have known Mrs. Lynch since 2003 when she started working for Amedisys. She is a seasoned, highly competent nurse who provides excellent patient care. I would welcome her to take care of any member of my family.

Mrs. Lynch's co-workers and patients have shared many praises, compliments and encounters. These are some of the comments from over the years: "I feel like she goes above and beyond for her patients and anytime I have covered for her, her patients LOVE her". "Anne is very knowledgeable, very competent, I feel very comfortable knowing that she is taking care of her patients, you don't have to worry when Anne is assigned to one of your patients". "She always has the patients' best interests at heart". "There is always an open dialogue with Anne". "If I had to pick any preceptor, it would be her, hands down; she is top notch to say the least". "Thank you for the loving care and concern you showed to me through the worst of my illness". "She is the best nurse ever". The list could go on but the praises all essentially convey the same message.



950 Houston Northcutt Blvd., Suite 105 • Mt. Pleasant, South Carolina 29464
Phone: 843.972.0416 • Toll Free: 866.972.0416 • Fax: 843.972.0421
amedisys.com

Amedisys Home Health Care

As an employee Mrs. Lynch has consistently been trustworthy, hardworking and a great asset to our team. She is one of the most thorough, well rounded and professional nurses I have known in my 25 year nursing career.

Respectfully submitted,



Connie Clark, RN, BSN

Director of Operations

Amedisys Home Health of Mount Pleasant 2209

950 Houston Northcutt Blvd, Suite 105

Mt. Pleasant, SC 29464

TF:866.972.0416

PH: 843.972.0416

FX: 843.972.0421

ccclark2209@amedisys.com

www.amedisys.com



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

IN THE MATTER OF:

REBECCA KIMBERLY HACKLEY, L.P.N.
License No. LPN.31917

OIE # 2008-494

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 26, 2010, at 9:00 AM* in Room 108, Kingstree 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:

REBECCA KIMBERLY HACKLEY, L.P.N.
License No. LPN.31917

OIE # 2008-494

Respondent.

MEMORANDUM OF AGREEMENT
AND STIPULATIONS

WHEREAS, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Rebecca K. Hackley, Respondent; and

WHEREAS, a Complaint has been served and filed, alleging that Respondent has violated S.C. Code Ann. § 40-33-110(A)(1), (3), and (13) and § 40-1-110(f), (1976, as amended). A copy of the Complaint, dated September 29, 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 licensed to practice as a Licensed Practical Nurse 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 June 30, 2008, Respondent obtained Ultram from a local pharmacy by using a fraudulent prescription.
3. That on or about July 6, 2008, Respondent attempted to obtain Ultram 50 mg by calling in a fraudulent prescription to a local pharmacy.
4. That on or about July 28, 2008, SC DHEC issued an arrest warrant against Respondent and arrested and charged her on September 18, 2008, for Obtaining Drugs by Fraud or Deceit.

5. That on July 10, 2009, this Board accepted a Consent Agreement, wherein Respondent admitted non-compliance with a previous Consent Agreement from July 2008. A copy of the Consent Agreement is attached hereto and incorporated herein as Exhibit 2.

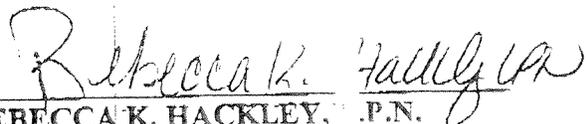
RESPONDENT ADMITS that the aforementioned acts of Respondent present grounds that constitute misconduct, as alleged.

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.

10/19/09, 2009



REBECCA K. HACKLEY, P.N.
RESPONDENT

_____, 2009

WITNESS or ATTORNEY

October 23, 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:

REBECCA KIMBERLY HACKLEY, L.P.N.
License No. LPN.31917

OIE # 2008-494

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.

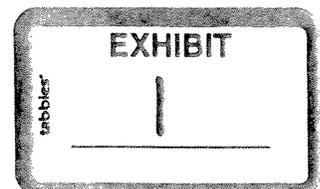
III.

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 June 30, 2008, Respondent obtained Ultram from a local pharmacy by using a fraudulent prescription.
- B. That on or about July 6, 2008, Respondent attempted to obtain Ultram 50 mg by calling in a fraudulent prescription to a local pharmacy.
- C. That on or about July 28, 2008, SC DHEC issued an arrest warrant against Respondent and arrested and charged her on September 18, 2008, for Obtaining Drugs by Fraud or Deceit.

IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. § 40-33-110(A)(1), (3), and (13) 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's arrest.
- B. Respondent has violated § 40-33-110(A)(3) (1976, as amended), 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 obtaining and attempting to obtain Ultram by fraud.
- C. Respondent has violated § 40-33-110(A)(13) (1976, as amended), in that she has obtained, possessed, administered, or furnished prescription drugs to a person including, but not limited to, one's self, except as directed by a person authorized by law to prescribe drugs.
- D. 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.

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

09/29/09
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 & REGULATION
BEFORE THE BOARD OF NURSING

In the Matter of:

Rebecca Kimberly Hackley, LPN

License # 31917

Respondent.

CONSENT AGREEMENT

By agreement of the Board of Nursing (the Board) and the above named Respondent, the following disposition of this matter is entered pursuant to the provisions of S.C. Code of Laws, §1-23-320(f) (1976, as amended) of the South Carolina Administrative Procedures Act:

FINDINGS OF FACT

1. Respondent is licensed to practice as a Licensed Practical Nurse 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 29, 2008, Respondent signed a Consent Agreement which placed restrictions on her practice including a requirement that she complete certain courses and pay a civil penalty.
3. Respondent admits that she failed to take two courses and pay the civil penalty due within the required time period. That on or about February 13, 2009, Respondent's license was suspended for failure to comply with the requirements of the April Consent Agreement.
4. Respondent admits that she continued to work until May 4, 2009, while her license was suspended.
5. Respondent waives any further findings of fact with respect to this matter.

CONCLUSIONS OF LAW

Respondent further admits that as a result of the previous admissions herein, Respondent has violated S.C. Code of Laws §40-33-110(A) (7) & (20) (1976, as amended). Respondent waives any further conclusions of law with respect to this matter.



THEREFORE, IT IS AGREED WITH RESPONDENT'S CONSENT THAT:

1. Respondent's license will be re-instated and issued a public reprimand and subject to the following conditions:
 - (a) Respondent shall pay a civil penalty of One Thousand (\$1,000.00) Dollars within 60 days of the effective date of this agreement for failure to comply with the Consent Agreement. Said penalty shall not be deemed paid until received by the Board in the form of a money order or cashier's check.
 - (b) Respondent shall pay a civil penalty of Seven Hundred and Fifty (\$750.00) dollars within 60 days of the effective date of this agreement for working without a valid nursing license. Said penalty shall not be deemed paid until received by the Board in the form of a money order or cashier's check.
2. It is understood and agreed that if Respondent fails to meet the conditions agreed to in this Consent Agreement, Respondent's license may be immediately suspend pending compliance. Non-compliance may result in further discipline. Any license law violations by Respondent constitute a failure to meet the conditions of this Consent Agreement.
3. It is further understood and agreed that, in accordance with the Nurse Licensure Compact, Respondent shall not practice nursing in any other party-state without the prior written approval of this Board and satisfactory documentation of prior written authorization from such other party-state.
4. It is further understood and agreed that, pursuant to the South Carolina Freedom of Information Act, this Consent Agreement is a public document.
5. It is further understood and agreed that this Consent Agreement does not satisfy, prejudice, or stay any disciplinary action currently pending before the Board or which may be filed in the future.
6. It is further understood and agreed that Respondent has full knowledge that she has the right to a hearing and to be represented by counsel in this matter, and freely, knowingly, and voluntarily waives such rights by entering into this Consent Agreement. Respondent understands and agrees that by entering into this Consent Agreement she voluntarily relinquishes any right to judicial review of this or any other Board action(s) which may be taken concerning this and any related matters. Respondent understands and agrees that this Consent Agreement will not become effective unless and until approved by the Board. Respondent understands and agrees that this Consent Agreement, if approved, will be disseminated as a public action of the Board in the manner provided by law.

Respondent understands and agrees that if this Consent Agreement is not approved, it shall not constitute an admission against interest in this proceeding or prejudice the right of the Board to adjudicate this matter.

7. This Consent Agreement shall take effect immediately upon acceptance by the Board.

AND IT IS SO ORDERED.

SOUTH CAROLINA BOARD OF NURSING

7-10, 2009



C. Lynn Lewis, RN, EdD, MHS
President of the Board

I CONSENT:

Rebecca Kimberly Hackley CPN 5/15/09
Rebecca Kimberly Hackley, LPN, Respondent Date


Attorney for the Board

5/15/09
Date

CERTIFICATE OF SERVICE BY MAIL

This is to certify that the undersigned has this date delivered to the undersigned in the above entitled matter upon full payment to the carrier 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 last known address (es) provided to LLR.

This 15 day of July 2009
By: [Signature]
Printed name, title & signature

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

In the Matter of:

REBECCA K. HACKLEY, L.P.N.,
License No. 31917

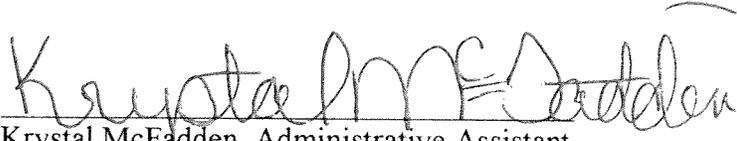
OIE 2008-494

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 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 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:

Ms. Rebecca K. Hackley
132 Lake Jogassee Drive
Summerville, SC 29485


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

7008 1140 0000 7031 7782

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

IN THE MATTER OF:

EUGENE E. WILLIAMS, III, R.N.
License No. RN.73497

OIE # 2009-158

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 26, 2010, at 10:00 AM* in Room 108**, Kingstree 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:

EUGENE E. WILLIAMS, III, R.N.
License No. RN.73497

OIE # 2009-158

Respondent.

MEMORANDUM OF AGREEMENT
AND STIPULATIONS

WHEREAS, the South Carolina Board of Nursing (hereinafter "the Board") has received an initial complaint with respect to Eugene E. Williams, III, Respondent; and

WHEREAS, a Complaint has been served and filed, alleging that Respondent has violated S.C. Code Ann. § 40-33-110(A)(3), (7), (9), and (20), and § 40-1-110(f) (1976, as amended). A copy of the Complaint, dated October 5, 2009, is attached hereto and incorporated herein as Exhibit 1.

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 was previously licensed to practice as a Registered Nurse in South Carolina and is subject to the jurisdiction of the Board.
2. That from approximately 2005 to April 20, 2009, Respondent worked as a Registered Nurse in the Cardiology Department of Internal Medicine Associates of Greenville, in Greenville, South Carolina. Respondent's license lapsed on April 30, 2006, and he continued to work as a nurse. Respondent's employment was terminated on April 20, 2009, when Respondent's employer discovered that his license had lapsed.
3. That Respondent forged the signature of a Registered Nurse on quarterly Nursing Performance Evaluations required of the SC Recovering Professional Program (RPP),

as per Board Order dated April 6, 2006. Said Registered Nurse did not supervise Respondent and was not aware that her name was being used on the evaluations. Said evaluations were submitted to RPP quarterly, commencing in June of 2008.

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.

11/3, 2009

Eugene E. Williams
EUGENE E. WILLIAMS, III, R.N.
RESPONDENT

11/3, 2009

Matthew D. Williams
WITNESS or ATTORNEY
Matthew D. Williams (Brother)

NOVEMBER 12, 2009

Joelyn 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:

EUGENE E. WILLIAMS, III, R.N.
License No. RN.73497

OIE # 2009-158

FORMAL COMPLAINT

Respondent.

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. Said license lapsed on April 30, 2006. This Board has jurisdiction over Respondent and the subject matter of this action.

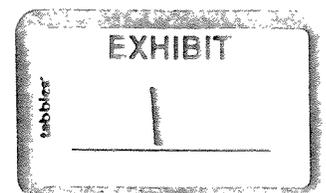
II.

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 from approximately 2005 to April 20, 2009, Respondent worked as a Registered Nurse in the Cardiology Department of Internal Medicine Associates of Greenville, in Greenville, South Carolina. Respondent's license lapsed on April 30, 2006, and he continued to work as a nurse. Respondent's employment was terminated on April 20, 2009, when Respondent's employer discovered that his license had lapsed.
- B. That Respondent forged the signature of a Registered Nurse on quarterly Nursing Performance Evaluations required of the SC Recovering Professional Program (RPP), as per Board Order dated April 6, 2006. Said Registered Nurse did not supervise Respondent and was not aware that her name was being used on the evaluations. Said evaluations were submitted to RPP quarterly, commencing in June of 2008.



IV.

As a result of the acts of misconduct alleged above, Respondent has violated S.C. Code Ann. § 40-33-110(A)(3), (7), (9), and (20), and § 40-1-110(f) (1976, as amended), in the following particulars:

- A. Respondent has violated § 40-33-110(A)(3) (1976, as amended), in that he 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 forging of quarterly performance evaluations.
- B. Respondent has violated § 40-33-110(A)(7) (1976, as amended), in that he has failed to comply with a directive or order of the Department or Board, as evidenced by Respondent failing to comply with the Board's Order requiring valid quarterly performance evaluations reports.
- C. Respondent has violated § 40-33-110(A)(9) (1976, as amended), in that he falsified or altered, for the purpose of reflecting incorrect or incomplete information, any organization's records, including personnel records or patient records.
- D. Respondent has violated § 40-33-110(A)(20) (1976, as amended), in that he has practiced nursing without a valid, current South Carolina license, or aided, abetted, or assisted another to practice nursing without a valid, current South Carolina license, as evidenced by Respondent continuing employment as a nurse after his license lapsed.
- E. Respondent has violated § 40-1-110(f) (1976, as amended), in that he has committed a dishonorable, unethical, or unprofessional act that is likely to deceive, defraud, or harm the public.

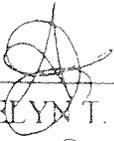
V.

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

10 / 05 / 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 SOUTH CAROLINA BOARD OF NURSING**

In the Matter of:

EUGENE E. WILLIAMS, III, R.N.,
License No. 73497

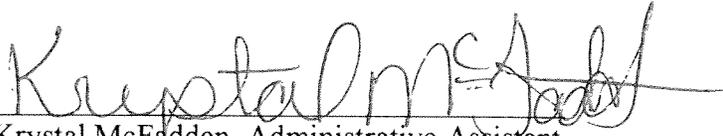
OIE 2009-158

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 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 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:

Mr. Eugene E. William, III
245 Congaree Rd, Apt. 213
Greenville, SC 29607


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

7008 1140 0000 7031 7775

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Street, Apt. or PO Box	[Redacted]
City, State	
PS Form 3800, August 2006 See Reverse for Instructions	



Dwight Hayes

From: rd_slater@charter.net
Sent: Thursday, December 03, 2009 1:53 PM
To: Dwight Hayes
Subject: Re: Re-instatement of license

Dear Mr. Hayes,

Yes I would like to go ahead and be scheduled to be heard by the Board on January 28, 2010. I currently reside in norther Wisconsin and unfortunately do not have the means to pay for travel expenses and childcare to come down to South Carolina. I understand that in the case of extenuating circumstances a phone meeting can take place. I want to find out if it is possible to go that route during that particular hearing date? Please let me know.

I will also send by mail the documentation you indicated was necessary to proceed with the hearing.

Thank you,

Robin Slater

----- Dwight Hayes <HAYESD@llr.sc.gov> wrote:

> Dear Ms. Slater,
>
> Joan Bainer forwarded your email to me for a response. I think
> there have been some misunderstandings in this process. You may come
> before the Board without enrolling in RPP but you will not get your
> license back until you do. I have an evaluation from Tom Manning that
> gives you a diagnosis of Opiate Dependence and the Board will require
> you to be in RPP and complete three months of drug testing before your
> license will be re-instated. You can speed up the process by
> enrolling now and coming before the Board after three months of
> testing. If you still want to appear without being in RPP, I will
> schedule you for the January meeting (January 28th). You will need to
> make a request in writing and you need to provide documentation on the
> disposition of the charges from DHEC.
>
> I will await your response.
>
> Dwight G. Hayes, Legal Counsel
> Office of Licensure and Compliance
> SC Department of Labor, Licensing and Regulation P. O. Box 12517
> Columbia, SC 29211-2517
> 803-896-7832
> Hayesd@LLR.SC.GOV
>

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

In the Matter of:

**ROBIN ALANE L. SLATER, RN,
License No. 58559**

OIE No. 2006-27
OGC No. 07-0012

Respondent.

FINAL ORDER

This matter came before the State Board of Nursing (the Board) for a final hearing on September 27, 2007 as a result of the Notice of Final Hearing, which was served upon the Respondent and filed with the Board. A quorum of Board members was present. The hearing was held pursuant to S.C. Code Ann. §40-1-90 (1976), as amended, and provisions of the South Carolina Administrative Procedures Act (the APA), S.C. Code Ann. §1-23-10, *et seq.*, (1976), as amended, to consider the report and recommendations of the disciplinary panel, said panel having conducted the evidentiary hearing on June 19, 2007. The State was represented by Dwight G. Hayes, Esquire, Assistant General Counsel, South Carolina Department of Labor, Licensing and Regulation. The Respondent appeared and was not represented by counsel.

The Respondent was charged with violation of S.C. Code Ann. §§40-33-110(A)(1), (3) and (18) (1976), as amended.

FINDINGS OF FACT

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

1. The Respondent is a registered nurse who is duly licensed to practice in the State of South Carolina, and she was so licensed at all times relevant to the allegations contained in the Complaint in this matter. Respondent's license lapsed in 2006 when she failed to renew by the renewal deadline, and additionally, on August 21, 2006, the President of the Board signed an Order that temporarily suspended Respondent's license.

2. The State alleges in the Formal Complaint that on or about January 1, 2006, while Respondent was employed at Roper St. Francis Hospital in Charleston, South Carolina, Respondent diverted controlled medications for her personal use. Respondent denies the accusation, but

acknowledges that she was arrested and there is a pending criminal charge. The State's attorney indicated that Respondent has not been convicted, and at this time, the State was not proceeding on the drug diversion allegation.

3. In addition to the pending charge of drug diversion, the South Carolina Department of Health and Environmental Control, Bureau of Drug Control simultaneously charged Respondent with Omitting Material Information In Required Records in violation of S.C. Code Ann. §44-53-390(A)(4). Respondent submitted a written response to the Formal Complaint in which she stated that she could not deny failing to document medication administered in patients' Medication Administration Records (MARs). During her testimony, she again acknowledged her failure to document the administration or wasting of medications. The State presented copies of records as examples of instances where the patient's MAR did not reflect that Respondent administered medication she withdrew from the PYXIS for the patient.

4. Respondent's license was previously subject to two years of probation which was based upon proceedings by the Illinois Board of Nursing with respect to Respondent's license in that State. Specifically, the Illinois Board of Nursing placed Respondent's nursing license on probation for two years for chemical dependency to drugs. A condition of Respondent's probation was that she be an active participant in the South Carolina Recovering Professional Program (RPP), which Respondent did until 2004 when she was released from probation and her license was fully reinstated.

5. Based upon the evidence provided, the Board finds that the Respondent has violated the Board's Practice Act as more fully set forth below.

CONCLUSIONS OF LAW

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

1. The Board has jurisdiction in this matter and, upon finding that a licensee has violated any of the provisions of S.C. Code Ann. §§40-1-110 and 40-33-110, has the authority to order the cancellation, revocation or suspension of a license to practice as a registered nurse or a licensed practical nurse or to publicly or privately reprimand the registered nurse or licensed practical nurse 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. The Board may also impose other restrictions upon the nursing practice of the licensee as circumstances warrant until the licensee demonstrates to the Board adequate professional competence. In addition to any other sanction imposed by the Board upon the licensee, the Board may require the licensee to pay a civil penalty of up to two thousand dollars to the Board for each violation of the provisions of the Nursing Practice Act, S.C. Code Ann. §40-33-5, *et seq.*, or of the regulations promulgated by the Board for a total penalty or fine not to exceed ten thousand dollars. The Board may also require individuals found to have violated the Nursing Practice Act or regulations promulgated by the Board to pay costs associated with the investigation and prosecution of the case.

2. The Respondent has violated S.C. Code Ann. §40-33-110(A)(1) (1976), as amended, in that the Respondent 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's admission that she omitted material information in required records by failing to document the administration and/or disposal of a controlled substance.

3. The sanction imposed is consistent with the purpose of these proceedings and has been made after weighing the public interest and the need for the continuing services of qualified nurses against the countervailing concern that society be protected from professional ineptitude and misconduct.

4. The sanction imposed is designed not to punish the Respondent, but to protect the life, health and welfare of the people at large.

NOW, THEREFORE, IT IS HEREBY ORDERED, ADJUDGED AND DECREED that:

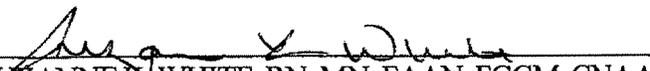
1. The Respondent's license shall be indefinitely suspended. Said suspension may be stayed and the license reinstated to active practice, but only after Respondent submits to an evaluation through the South Carolina Recovering Professional Program (RPP), and personally appears before the Board for determination of what license restrictions, if any, are appropriate.

2. Prior to reinstatement of her license, Respondent must attend and successfully complete a Board-approved Legal Aspects Workshop.

3. This final order shall take effect upon service of the order on the Respondent or Respondent's counsel.

AND IT IS SO ORDERED.

SOUTH CAROLINA STATE BOARD OF NURSING

By: 
SUZANNE K. WHITE, RN, MN, FAAN, FCCM, CNA
President of the Board

10/21, 2007.

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:

ROBIN ALANE L SLATER



NOV 05 07 PM 10:57

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Pat Langford* Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

Pat Langford *11/3/07*

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7006 3450 0003 4405 0292

Wilson
Final Order

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 3450 0003 4405 0292

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
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Street or PO	ROBIN ALANE L SLATER
City	
PS Form	Instructions



South Carolina Department of Labor, Licensing and Regulation

Mark Sanford
Governor

Adrienne Riggins Youmans
Director



South Carolina Board of Nursing

110 Centerview Drive
Post Office Box 12367
Columbia, SC 29211-2367
Phone: (803) 896-4550
FAX: (803) 896-4525
www.llr.state.sc.us

November 8, 2007

ROBIN ALANE L. SLATER
140 SAVANNAH ROUND
SUMMERVILLE, SC 29485

COPY

Dear Ms. Slater:

Enclosed you will find your Final Order, wherein the Board suspended your license indefinitely until you have completed the following conditions:

- 1) An evaluation conducted by the Recovering Professional Program;
- 2) Once evaluation has been completed, the respondent must make a personal appearance before the Board for determination of what license restrictions will be placed on the license;
- 3) Board-approved Legal Aspects Workshop (**Completed on 9/14/2007**).

Once the Board has made a determination on your license regarding restrictions, you will need to complete the CEU courses prior to reinstatement of your lapsed/suspended license.

I can be reached at (803) 896-4659.

Sincerely,


Sherry A. Wilson
Compliance Coordinator

.saw

Enclosure: Final Order

Certificate of Attendance

This is to certify that

ROBIN ALANE L SLATER RN

License Number 58559

attended the

SC Board of Nursing Legal Aspects Workshop

On September 14, 2007

Joan K. Bainer, MN RN CNA BC

Joan K. Bainer, RN, MN, CNA BC, Board Administrator
SC Board of Nursing

Presented on September 14, 2007 by Maggie Johnson at the SC Board of Nursing, 110 Centerview Drive, Columbia, SC 29210
No Continuing Education Credits are awarded for this workshop

Bobbie Dunn

From: Sherry Wilson
Sent: Thursday, March 05, 2009 4:07 PM
To: Bobbie Dunn
Subject: FW: Robin Slater
Attachments: slater - evaluation.pdf

Please Scan

From: Julie Surles [mailto:JSurles@lradac.org]
Sent: Tuesday, March 03, 2009 3:35 PM
To: Sherry Wilson
Cc: Matteah Taylor
Subject: RE: Robin Slater

A copy of the evaluation is attached. Please note the diagnosis on the last page, and the recommendation to enroll with RPP. Please let me know if you have any further questions.

From: Sherry Wilson [mailto:WILSONS@lfr.sc.gov]
Sent: Tuesday, March 03, 2009 3:08 PM
To: Julie Surles
Cc: Matteah Taylor
Subject: RE: Robin Slater

Do you have a copy of the evaluation? She is going to fax a copy and she says it did not state she had a chemical dependency.

From: Julie Surles [mailto:JSurles@lradac.org]
Sent: Tuesday, March 03, 2009 1:36 PM
To: Matteah Taylor
Cc: Sherry Wilson
Subject: RE: Robin Slater

Ms. Slater has a diagnosis of Opioid Dependence, and has not been enrolled with RPP since 2003. She contacted me in 2007 regarding reenrolling, but has refused to do so to date. At that time she requested to appear before the full Board to ask for a reduced time in monitoring (less than the standard five years), and after reviewing the evaluation summary submitted regarding Ms. Slater, Mr. Hayes informed her that she would need to enroll with RPP and get into compliance before she could appear for the full Board. She is scheduled to reenroll with me on this Friday, 3/6, and will be required to submit to reevaluation, hair test, and a minimum of 3-6 months of urine drug screening before we would make a recommendation regarding her fitness to practice nursing. I will follow-up if and when she has met these criteria. Please let me know if you have any further questions.

Julie S. Cole, LMSW, CACI
Recovery Specialist, SCRPP
300-A Outlet Pointe Boulevard
Suite 100
Columbia, SC 29210
803-896-5704 - office
803-896-5710 - fax

From: Matteah Taylor [mailto:TaylorM@lr.sc.gov]
Sent: Tuesday, March 03, 2009 12:05 PM
To: Julie Surles
Cc: Sherry Wilson
Subject: Robin Slater

Hi Julia,

I received a call from Ms. Robin Slater and she states she was released from RPP because there was nothing found. At this time she wants to receive her license back and the Board is in need of documentation on her. Could you forward me documentation stating that she has been released and why? Thanks for your assistance.

Matteah Taylor
Office of Licensure &
Compliance Department
(803) 896-4560

3/6/2009

Please click on the link below to complete the Customer Service Satisfaction Survey; it only takes a minute to complete. This will let my supervisor know if you were satisfied or dissatisfied with the service you received from me. Thanks

<http://www.llr.state.sc.us/polsurvey/index.asp>

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October 2, 2007

Ms. Julie Surles
Recovering Professional Program
300-A Outlet Pointe Boulevard
Columbia, SC 29210

Re: Robin Slater, RN
SS # 104-60-4699

Introduction/Presenting problem:

Ms. Robin Slater presented for substance abuse evaluation at the recommendation of Ms. Julie Surles of the Recovering Professionals Program. Ms. Slater states that in January of 2006 she was contacted by an Investigator from D.H.E.C. who stated that allegations had been made against her re: medications taken from the Pyxis at her place of employment. Furthermore, documentation of those medications being removed was missing from the MAR. At the time she was employed at St. Francis Hospital in Charleston, S.C. The discrepancies were detected via an audit conducted by hospital pharmacy personnel. Ms. Slater denied taking medication from the Pyxis inappropriately; however she did acknowledge her failure to record that she had taken the medication in the MAR. She was arrested and charged with one count of "theft of a Narcotic" and one count of "omission of medical information." Her summation of the situation is that she was viewed as a person capable of stealing medication because of a past experience while living in Illinois.

In the year 1996 Ms. Slater worked at the Alexian Brothers Hospital in Illinois. During that period of time she had been experiencing medical problems for some time. In fact, she said, not long before she was caught taking medication prescribed for a patient, she had been told by a physician that another surgery might be needed to alleviate symptoms associated with Endometriosis.

One day while at work Ms. Slater says she was experiencing pain. A co-worker who was aware of her pain and discomfort offered to give her medication. The medication that was offered had been prescribed by a physician for one of the patients under the care of the co-worker; she was going to sign it out and give it to Ms. Slater who accepted 2 Vicadin for personal use.

For the next two months, Ms. Slater says that she did not take any medication for her Endometriosis. It was after that two month period that she made the decision to take "pain medication" belonging to one of her patients. She was caught! The drug-count was "off" and the effects of the "Demerol" made her lethargic which drew attention to her demeanor. She was confronted and admitted taking the patients medication. She was let go from her employment and referred to the Recovering Professionals Program. Once enrolled in RPP, she said, "I was told to go to either AA or N/A and was required to

attend a professional's support group but I didn't have to go to treatment; the Nursing Board suspended my license for a year."

While being monitored by RPP Ms. Slater's husband was given an opportunity to transfer to South Carolina. She saw this as an opportunity to return "home" and was able to successfully petition RPP to transfer her case and she enrolled in the SC Recovering Professionals Program and ultimately received a successful completion from the program.

Substance use/medication history:

Ms. Slater says she was the age of 15 or 16 before taking her first drink of an intoxicating beverage. In retrospect, she feels her older brothers may have had an influence on her experimentation with alcohol during that time. A "social" pattern of alcohol use began between the ages of 24 and 26; she emphasized that she did not drink regularly prior to the birth of her first child. Ms. Slater defines "social drinking" as having one or two drinks at social gatherings, on Holiday's, during family gatherings with family or having a glass of wine with dinner. When asked if she had ever drunk to the point of intoxication she said "yes". She recalls having about 5 mixed drinks on New Years two years ago during which she did become intoxicated. The last use of alcohol reported was in May of 2007, during the last dinner she had with her husband before she left the marital home.

Ms. Slater says she used marijuana minimally and only during her college years. She reported using marijuana no more than one or two times between the ages of 21 and 24; additional use was denied.

Initial opiate use is stated to have begun with her first surgery in 1988 and the last use of an opiate is said to have occurred in the year 2000. All incidents of opiate use were related to medical conditions and usually followed surgical procedures with one exception, the situation in Illinois when she acknowledged taking Demerol from her place of employment.

Ms. Slater denies ever having been referred for treatment of substance abuse. She does acknowledge that she has attended PAIN groups and 12- step groups and continues to attend a group similar to ALANON. She feels she has never been 'addicted' to any substance and relates the incident of diversion in 1996 to the need to relieve pain from a medical condition.

Medical:

Ms. Slater describes herself as having a history of "female problems". She reports having undergone 3 Laparoscopic surgeries associated with Endometriosis. She says that at one time she was told by physician that she would never be able to bare children but since has had 2 C-Sections. When younger, she had a tonsillectomy and in later years has had oral surgery on two separate occasions. Medications were prescribed to relieve physical discomfort after surgeries, however, she contends that the medications were taken as prescribed and denies abuse or misuse of her prescriptions.

Current medications are reported to be:

Lexapro 10 mg Q Day PO

Toprol XL 25 mg Q Day PRN (for arrhythmias)
Restoril 15 mg Q HS PO PRN (insomnia)
Singulair 10 mg Q Day PRN
Flonase Inhaler BID PRN
Aspirin PO QD PRN (headaches)
Motrin BID PO PRN (pain)

Legal History:

There are two legal charges pending resulting from the allegation of "stealing drugs and omitting medical information" while working at St. Francis Hospital. The date and time of the court date was not disclosed. Other legal charges were denied.

Family/Marital:

Robin Slater was born in Washington State. Her dad was a Chief in the US Navy and because of his Navy career the family had opportunity to travel extensively and to make their home in various places. "We moved a lot" said Ms. Slater. However, the majority of her developmental years and young adulthood was spent in South Carolina. She attended high school in Summerville and rates her childhood as a 9.5 on a scale of 10. Ms. Slater's dad retired from the Navy, and again from a job he later took in the field of building management. Her mother retired as a Registered Nurse. Ms. Slater describes her relationships with all members of her family as being "very close". She has 3 older brothers and a younger sister, all of whom stay in constant contact with one another. In the year 2004 and at the age of 24, Ms. Slater met the man she was to marry. Two years later they were married in the state in which Mr. Slater was born; Illinois. However, as previously stated, the couple returned to South Carolina in 1998. Mr. Slater worked as a sales representative in a company in which he was a partner. The company specialized in Scientific Equipment. Mr. Slater's relationship with his partner began to sour and eventually ended. He then started his own company which struggled on and off, and finally failed after 3 years of trying to make it work. He now works for a different employer. Ms. Slater says the marriage also became a struggle and from her perspective, is failing. She left the marital home in May of this year and moved in with her parents. She is accompanied by her daughter Madeline, age 8 and her son Jack, who is 4 years of age. Mr. Slater continues to provide financial support but Ms. Slater is considering selling a home she owns in Summerville.

Education/Employment:

After graduation from high school Ms. Slater took advantage of a scholarship offered her at a private college but it wasn't a nursing scholarship. She really wanted to follow in the footsteps of her mother in the field of nursing and after a year of being educated in a field in which she had no interest she dropped out of school to work as a waitress. Her plan was to earn enough money to begin her education in nursing. After enrolling in a school of nursing she began working at a V.A. Hospital as a student nurse. She was fortunate enough to receive her training at the Medical University in Charleston, SC. After being hired at St. Francis she soon received another opportunity; the hospital offered to pay for the last year and a half of her educational costs. Employment at St. Francis ended 5 years later when legal charges were levied against her.

Test results:

The eleven (11) panel urine drug screen taken at time of evaluation was returned with negative results. A hair test was not ordered by the referral source and none was requested by the evaluator.

Integrative formulation:

Ms. Robin Slater, RN is a 37 y/o Caucasian female presenting for substance abuse evaluation. Ms. Slater says she has no immediate income from employment. Financially she is receiving some support from her estranged spouse. She and her children are living with her parents since the separation from her spouse.

Ms. Slater's manner during interview was pleasant and she was cooperative when asked to complete the customary hardcopy substance abuse history; this is done to make comparison between what is said and what is documented by the individual's own hand. There was consistency between what Ms. Slater verbally reported and what she wrote in the substance abuse assessment form during the interview process. There were inconsistencies, however, in the information presented at interview and that recorded in her RPP records.

Ms. Slater stated in interview that her license was suspended for one year as a result of the legal charges incurred in Illinois when she took Demerol from her work place. RPP records show that her license to practice as a Registered Nurse was disciplined following her admission of diverting Demerol. The consequence of that behavior was that she was referred for bi-weekly "counseling" with the Employment Assistance Program at Alexian Brothers Medical Center and a "treatment" plan was developed so she could work without handling narcotics. Records also show that she failed to abide by the terms of the EAP agreement. Ultimately she was placed on two years probation and her license to practice as a nurse was suspended indefinitely in the state of Illinois.

During this substance abuse interview Ms Slater denied ever being referred for counseling and failed to mention the 2 year probation. She also denied ever receiving a substance abuse diagnosis. The South Carolina Department of Labor, Licensing & Regulation State Board of Nursing Disciplinary Panel Report dated July 9, 2007, pg. 2, Para. 4. Reads: "Specifically, the Illinois Board of Nursing placed Respondent's nursing license on probation for two years for chemical dependency to drugs".

My impression of Ms Slater's omission of information during the substance abuse interview is that she feels that the omitted information, if known, would be viewed as unfavorable and therefore disclosure of that information would not be in her best interest. In spite of her denial that she has no previous substance abuse diagnosis, her nursing license was given probationary status for chemical dependency by the Illinois Board of Nursing; the term 'Chemical dependency' implies that a more specific diagnosis was previously given.

In integrating all available information re: Ms. Slater, my belief is that she has not been totally and completely abstinent from mood altering substances. However Ms. Slater's urine drug screen showed negative results which must be included in the final analysis. Having established that Ms. Slater has a substance abuse diagnosis it must be determined if a diagnosis of Chemical Dependency should include a specifier of Remission and secondly, whether or not the use of alcohol has an affect on a "chemical dependency" diagnosis. In making this determination, I refer to the SC State Board of Nursing 'Stipulation and Petition' dated in the year 2000 when Ms Slater's license was reinstated; language in that document required that Ms. Slater, "shall completely abstain from the consumption of all mood-altering substances, including alcohol, except as prescribed by a duly licensed practitioner". Ms. Slater was also held to a standard of "total abstinence" while involved with the SC Recovering Professionals Program which she successfully completed in 2004. A successful completion shows that beyond a doubt, Ms. Slater was aware that anything other than total abstinence from all mood altering substances was unacceptable; the use of alcohol would have a direct bearing on the status of her diagnosis.

Ms. Slater admits to the non-medicinal use of alcohol as recently as May of this year. Using the DSM-IV-TR, I conclude that Ms. Slater's current diagnosis of "Chemical Dependence" warrants a specifier of "Early Partial Remission". In Initial Screening for the Recovering Professional Program, when completing the "Participant History", Ms. Slater reports her drug of choice to be "Demerol"

Diagnosis:

AXIS I 304.00 Opioid Dependence in Sustained Partial Remission

AXIS II V71.09 No Diagnosis Axis II

AXIS III Endometriosis

AXIS IV Finances/marital relationship

AXIS V GAF Past 60 Current 62

Recommendations:

Recommendations resulting from the substance abuse evaluation of Robin Slater are as follows:

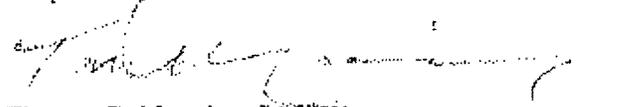
Continued attendance at Nursing Support groups

Resume attendance at N/A or AA 12-step groups

Follow all Nursing Board recommendations

Enroll to be monitored in the SC Recovering Professionals Program

Respectfully submitted;



Thomas E. Manning, LMSW

Manager, Addiction Recovery Center

Matteah Taylor

From: Julie Surles [JSurles@iradac.org]
Sent: Tuesday, March 03, 2009 1:36 PM
To: Matteah Taylor
Cc: Sherry Wilson
Subject: RE: Robin Slater

Ms. Slater has a diagnosis of Opioid Dependence, and has not been enrolled with RPP since 2003. She contacted me in 2007 regarding reenrolling, but has refused to do so to date. At that time she requested to appear before the full Board to ask for a reduced time in monitoring (less than the standard five years), and after reviewing the evaluation summary submitted regarding Ms. Slater, Mr. Hayes informed her that she would need to enroll with RPP and get into compliance before she could appear for the full Board. She is scheduled to reenroll with me on this Friday, 3/6, and will be required to submit to reevaluation, hair test, and a minimum of 3-6 months of urine drug screening before we would make a recommendation regarding her fitness to practice nursing. I will follow-up if and when she has met these criteria. Please let me know if you have any further questions.

Julie S. Cole, LMSW, CACI
Recovery Specialist, SCRPP
300-A Outlet Pointe Boulevard
Suite 100
Columbia, SC 29210
803-896-5704 - office
803-896-5710 - fax

From: Matteah Taylor [mailto:TaylorM@lr.sc.gov]
Sent: Tuesday, March 03, 2009 12:05 PM
To: Julie Surles
Cc: Sherry Wilson
Subject: Robin Slater

Hi Julia,

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3/3/2009

STATE OF SOUTH CAROLINA)
) BEFORE THE STATE BOARD OF NURSING
 In the Matter of:) FOR SOUTH CAROLINA
)
 ROBIN SLATER, 58559) NOTICE OF FILING FINAL ORDER
)
 Respondent.)
 _____)

TO: THE RESPONDENT ABOVE-NAMED

YOU WILL PLEASE TAKE NOTICE that the Order rendered in the decision of January 25, 2001, in the above entitled action, of which a copy is attached hereto, was filed in the office of the Administrator of the Board on February 1, 2001.

for Donald W. Hayden
 DONALD W. HAYDEN, MANAGER
 REGULATORY COMPLIANCE

Columbia, South Carolina

CERTIFICATE

THIS IS TO CERTIFY that the above Notice of Filing and copy of Order were served upon the respondent and/or her attorney by certified mail on February 10, 2001.

for Donald W. Hayden
 DONALD W. HAYDEN, MANAGER
 REGULATORY COMPLIANCE

Columbia, South Carolina
 February 1, 2001

BEFORE THE STATE BOARD OF NURSING FOR SOUTH CAROLINA

In the Matter of:

**Robin L. Slater,
RN, 58559,**

Respondent.

**ORDER TO
REINSTATE LICENSE**

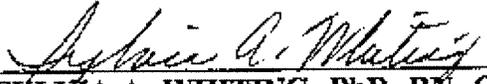
WHEREAS, on January 25, 2001, the license to practice nursing of Respondent above-named was placed on suspension with an immediate stay for a period of not less than one (1) year, upon compliance with certain conditions imposed by the State Board of Nursing for South Carolina ("Board"), and

WHEREAS, Respondent has made application for rescission of said suspension and full reinstatement of Respondent's license by the Board, and upon good cause being shown thereof,

NOW, THEREFORE, IT IS ORDERED that the license to practice nursing in the State of South Carolina be reinstated forthwith as to Respondent, **Robin L. Slater**, and that Respondent shall henceforth receive and be entitled to all the privileges and designations in accordance therewith and Respondent shall be entitled to exercise the duties and responsibilities according to the licensing provisions of the Nurse Practice Act for the State of South Carolina.

AND IT IS SO ORDERED.

STATE BOARD OF NURSING



SYLVIA A. WHITING, PhD, RN, CS
President of the Board

Columbia, South Carolina
May 27, 2004.

IN THE MATTER OF:)
)
)
ROBIN SLATER, 58559)
)
_____)

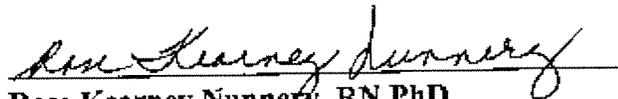
FINAL ORDER

This matter comes before the State Board of Nursing for South Carolina ("Board") by way of Respondent's Stipulation and Petition dated December 18, 2000, which is attached hereto and is incorporated herein by reference.

The Board considered Respondent's Stipulation and Petition at its meeting of January 25, 2001. After due consideration of the matter, the Board hereby accepts Respondent's Stipulation and Petition and adopts the terms and conditions therein as its disposition of this matter pursuant to the provisions of S.C. Code Ann. §1-23-320(f) (Supp.1996) of the South Carolina Administrative Procedures Act.

AND IT IS SO ORDERED.

STATE BOARD OF NURSING


Rose Kearney Nunnery, RN PhD
President of the Board

Columbia, South Carolina
January 25, 2001

BEFORE THE STATE BOARD OF NURSING FOR SOUTH CAROLINA

In the Matter of:

**Robin L. Slater,
RN, 58559**

Respondent.

STIPULATION AND PETITION

COMES NOW RESPONDENT and stipulates and admits the following facts and proposed disposition of this matter pursuant to the provisions of S.C. Code Ann. §1-23-320(f)(Supp. 1998) of the South Carolina Administration Procedures Act:

1. Respondent admits that she is licensed to practice nursing as a registered nurse in South Carolina and was so licensed at all times relevant to the matters asserted in this case. Said license lapsed on January 31, 1997.

2. Respondent admits that on or about July 10, 2000, Respondent's license was placed on probation for a period of not less than two (2) years by the Illinois Board of Nursing for her chemical dependency to drugs.

3. Respondent further admits that as a result of the previous admissions herein, Respondent has violated S.C. Code Ann. §40-33-935 (f)(Supp. 1998).

4. Respondent waives any further findings of fact or conclusions of law with respect to this matter.

5. Respondent has full knowledge that she has the right to a hearing and to be represented by counsel in this matter, and freely, knowingly, and voluntarily waives such rights by entering into this Stipulation and Petition. She voluntarily relinquishes any right to judicial review of Board action(s) which may be taken concerning any related matters. Respondent understands and agrees that this Stipulation and Petition will not become effective unless and until approved by the Board. Respondent understands and agrees that a representative of the General Counsel's Office may be present during presentation of this Stipulation and Petition to the Board and that the Board shall have the authority to review portions of the investigative file and all relevant evidence in considering this Stipulation and Petition. Respondent understands and agrees that this Stipulation and Petition, if approved, will be attached and incorporated into a Final Order of the Board and may be disseminated as a public action of the Board. Respondent understands and agrees that if this Stipulation and Petition is not approved, it shall not constitute an admission against interest in this proceeding or prejudice the right of the Board to adjudicate this matter.

ACCORDINGLY, RESPONDENT HEREBY PETITIONS the Board to issue a Final Order of the Board adopting the following sanction, which shall continue in effect until further Order of the Board:

1. Respondent's license to practice nursing as a registered nurse in this State is hereby reinstated and immediately placed on probation for a period of two (2) years concurrent with the Illinois Board of Nursing. After the service of not less than two (2) years of active probation, Respondent may petition the Board for reinstatement only after Respondent has satisfied the following specified pre-conditions:

- a. Respondent agrees to be employed as a nurse in a Board-approved setting, to provide a copy of the Stipulation and Petition (Final Order) and the disciplined license (see Back License) to all employers, and to cause the employer to submit quarterly written reports to the Board or its designee during the period of discipline. Said reports shall be submitted on or before the 20th day after three months of practice in that setting, and every third month thereafter. Respondent **must be supervised** by a registered nurse (RN) who **must remain on-site** at all times. Respondent **may not be employed** as a home health nurse.
- b. Respondent shall completely abstain from the consumption of mood-altering substances, including alcohol, except as prescribed by a duly licensed practitioner for a documented legitimate medical purpose. All use of such substances is to be reported by Respondent to the Board or its designee within 48 hours of initiation. All such medical treatment and prescribing shall be reported directly to the Board in writing by the treating practitioner within ten (10) days after the date of treatment. Respondent must inform the treating practitioner of this responsibility and ensure timely compliance. Failure to inform the treating practitioner of this responsibility shall be considered a violation of this Final Order.
- c. Respondent shall be subject to periodic, unannounced blood and urine alcohol and/or drug analysis as desired by the Board, the purpose being to ensure that Respondent remains drug and/or alcohol-free. The cost of such blood and urine alcohol and/or drug analyses and reports will be borne by Respondent, which costs shall be paid within thirty (30) days after the date of the receipt of the invoice. Failure to make timely payment of such costs, to provide a specimen upon request, or to remain alcohol and/or drug-free shall be considered a violation of this Final Order.
- d. Respondent must have a written contract with and be an active participant in the activities of Recovering Professional Program (the Program), as approved in advance in writing by the Board, until a period of not less than five (5) years of documented sobriety and compliance with this Agreement has been satisfactorily established by Respondent and until further Order of the Board. Such contract shall specify the required frequency of attendance at support groups, or other such activities as the Program shall deem appropriate, including, but not limited to:
 - (1) Assessment and treatment requirements of the Program;
 - (2) Monitoring (counseling) and aftercare activities of the Program;
 - (3) Participation in Alcoholics Anonymous (AA) and/or Narcotics Anonymous (NA);
 - (4) S.C. Nurses' Peer Assistance Program or its equivalent approved by the Board;
 - (5) Such additional therapeutic activities as deemed appropriate and necessary by the Program when incorporated into the contract.

Respondent shall submit or arrange for the submission of quarterly written reports documenting Respondent's regular participation in such therapeutic activities deemed appropriate by the Board, and documenting Respondent's full compliance with the terms of the contract with the Program and this Final Order.

- e. Within thirty (30) days of the date of this petition, Respondent must provide to the Board a letter signed by an appropriate representative of the Program mentioned above verifying that Respondent has signed a written contract with and become an active participant in the activities of the aftercare Program, as required above. Compliance with this paragraph shall not be deemed satisfied until said written verification is received by the Board. Failure to comply with this requirement within the prescribed time shall automatically result in the immediate temporary suspension of Respondent's license to practice until such time as full compliance has been made by Respondent.
- f. Respondent agrees to seek health care from a primary care practitioner who is knowledgeable in the care and treatment of chemical addictions.
- g. Respondent shall appear and report to the Board as requested by the Board.
- h. Respondent shall **promptly advise** this Board in writing of any changes in address, practice, hospital privileges, professional status, or compliance with this agreement. Correspondence and copies of reports and notices mentioned herein shall be directed to:

LLR-Board of Nursing
Post Office Box 12367
Columbia SC 29211 2367

2. It is understood and agreed that by executing this petition, Respondent specifically agrees to execute and to deliver to the Board, within ten (10) days of request, an authorization for the release to the Board of any and all records, reports, or other information concerning Respondent by any and all persons entities involved, notwithstanding any privilege provided by state or federal law. Failure to comply with this requirement within the prescribed time shall automatically result in the immediate temporary suspension of Respondent's license to practice until such time as full compliance has been made by Respondent.

3. Should Respondent fail to comply with any of the provisions of the Final Order accepting this Stipulation and Petition, or if it should be indicated from reliable reports submitted to the Board that Respondent is otherwise unable to practice nursing with reasonable skill and safety to patients, then Respondent's license may be immediately temporarily suspended until further Order of the Board following hearing into the matter. It is understood and agreed that by executing this Agreement, Respondent specifically consents to waive the procedural requirement of S.C. Code Ann. §40-33-930 and Regulation 91-19.d. It is understood and agreed that by executing this petition, Respondent specifically consents to consideration by the Board of any appropriate sanction under §40-33-930 after the hearing required by this paragraph.

4. At such time as Respondent petitions for reinstatement or files a new application, as may be required by law, Respondent will have the burden of proving, among other things, rehabilitation and fitness to re-enter practice, and any decision will be in the sole discretion of the Board.

5. Pursuant to the South Carolina Freedom of Information Act, the Final Order, with attachments, is a public document.

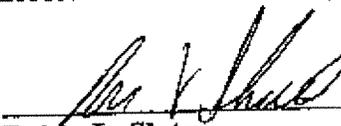
6. Respondent shall cooperate with the Board, its attorneys, investigators, and other representatives in the investigation of Respondent's practice and compliance with the provisions of the Final Order accepting this Stipulation and Petition. Respondent may be required to furnish the Board with additional information as may be deemed necessary by the Board or its representatives. In addition to such requests, the Board in its discretion may require Respondent to submit further documentation regarding Respondent's practice, and it is Respondent's responsibility to fully comply with all reasonable request in a timely fashion. Failure to reasonably comply with such requests will be deemed a violation of the Final Order.

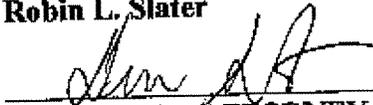
7. The Final Order shall take effect immediately upon receipt by Respondent or her counsel.

THEREFORE, Respondent respectfully prays that the Board accept this Stipulation and Petition and render a final agency decision in accordance herewith in disposition of this matter.

12-18-00
DATE

12-18-00
DATE


Robin L. Slater


WITNESS OR ATTORNEY

REC'D
S - MAIL ROOM
DEC 18 2000

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

In the Matter of:

Robin A. Slater, RN

License # 58559

OIE # 2006-27

OGC 07-0012

Respondent

ORDER OF TEMPORARY SUSPENSION

WHEREAS, the Respondent is a Registered Nurse in South Carolina and subject to the jurisdiction of the South Carolina State Board of Nursing, hereinafter referred to as the Board; and

WHEREAS, the Board has the authority, pursuant to SC Code of Laws Ann. §1-23-370(c), (1976, as amended) to suspend the license of a nurse summarily, pending further proceedings on the nurse's license when the Board has information that causes it to believe that the public health, safety or welfare imperatively requires emergency action; and

WHEREAS, the Board has received information which causes it to believe that the public health, safety or welfare is imperatively threatened by Respondent's conduct, to wit:

1. That on or about July 10, 2000, Respondent's Illinois nursing license was placed on probation for two (2) years for chemical dependency to drugs by the Illinois Board of Nursing. Respondent signed an agreement with South Carolina admitting the action by Illinois and agreeing to treatment and monitoring for a period of two (2) years concurrent with the Illinois action.
2. That on or about January 1, 2006, while employed at Roper St. Francis Hospital in Charleston, SC, Respondent diverted controlled medications, specifically Meperidine, for her personal use. That on or about January 9, 2006, Respondent was arrested by the SC Department of Health and Environmental Control, Bureau of Drug Control, and charged with Theft of a Controlled Substance (Meperidine) and Omitting Material Information in Required Records.

NOW, THEREFORE, IT IS ORDERED:

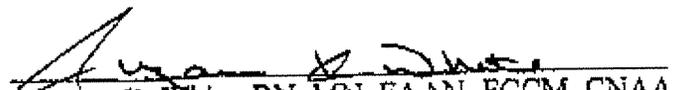
1. That Respondent's license to practice nursing in this State is hereby temporarily suspended effective immediately, until such time as formal charges can be brought against the Respondent and until further Order of the Board. The Board shall proceed expeditiously in reaching a final disposition of this case.

2. Respondent shall cooperate with the Board, its attorneys, investigators and other representatives in the investigation of Respondent's practice and of her compliance with the provisions of this Order. Respondent may be required to furnish the Board with additional information as may be deemed necessary by the Board or its representatives. In addition to such requests, the Board in its discretion may require Respondent to submit further documentation regarding Respondent's practice, and it is Respondent's responsibility to comply fully with all reasonable requests in a timely fashion. Failure to comply reasonably with such requests will be deemed a violation of this Order.

AND IT IS SO ORDERED.

SOUTH CAROLINA BOARD OF NURSING

8/21 . 2006


Suzanne K. White, RN, MN, FAAN, FCCM, CNAA
President of the Board

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Alan Slater</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Alan Slater</i></p> <p>C. Date of Delivery <i>10/2/06</i></p>
<p>1. Article Addressed to:</p> <p>Robin Alane L. Slater</p> <p>[Redacted Address]</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article N (Transfer) 7006 0100 0000 7424 4005</p>	<p><i>COOK 2006-27</i></p>

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-10-1040

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com . OFFICIAL USE	
Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage \$	Postmark Here <i>COOK</i>
Sent To Robin Alane L. Slater Street, Apt. # or PO Box No. City, State, ZIP	

7006 0100 0000 7424 4005

PS Form 3800

February 11, 2010
Meghan McCoy
1012 Rosewood Lane
Mount Pleasant, SC
29464
2010 FEB 12 AM 9 32

Attn: Dwight Hayes & Board of Nursing

Re: Reinstatement of license # 899992 RN Meghan McCoy

Dear Mr. Hayes,

This is my official request to have my nursing license reinstated by the South Carolina Board of Nursing at the March 25th hearing.

Since the surrender of my license in April 2009 I have willingly and successfully followed the instructions received by you personally at the time of the surrender and the advisement of RPP in order to qualify for reinstatement.

Between June – August of 2009, I successfully completed a 45-day inpatient treatment at Morris Village in Columbia, SC. I then, between August 2009 – October 2009, successfully completed a 60-day outpatient treatment at Shoreline Rehabilitation and Addiction Specialists in Conway, SC. I found a wonderful sponsor. At this time I also began attending at a minimum 3 Alcoholics Anonymous or Narcotics Anonymous meetings per week. In November of 2009 I was transitioned to Aftercare at Shoreline, which I also successfully completed. I enrolled in First Lab random drug testing in accordance with RPP and have presented myself for testing every time that I have been asked to do so. I continue to attend meetings regularly approximately 3 to 4 a week, one of which I frequently chair.

At this time I ask you and the Board of Nursing to reinstate my nursing license per my request and on the recommendation of RPP.

Thank you,

Sincerely,



Meg McCoy

Cc: Tia Cooper, MA- CAC II

RECEIVED FEB 23 2010

RECOVERING
Professional Program

Memorandum

To: LLR
From: RPP - Tia Cooper, MA, CACH
Date: 1/23/2009
Board: Nursing
Re: Meghan E. McCoy, RN #R0992

Date of Enrollment: December 16, 2008
Referred by: employer
Volunteer: No
Date of non-compliance: January 22, 2009
Date of Discharge: January 22, 2009
Date of Re-enroll: NA

RPP is reporting that, Meg McCoy license number 89992, is being discharged from RPP for non-compliance.

Meg is non-compliant due to the following reasons listed below.

- X Failure to comply with treatment recommendations.
- X Failure to provide sample of drug screen

Time Line / Comments: Meg enrolled with SC RPP on December 16, 2008 after being recommended by her employer, East Cooper Hospital due to suspicion of being under the influence at work. Meg admitted me that she has a problem with opiates dating back to March 2007.

Meg was referred to Debbie Seabrook, MED L.P.C, in Mt. Pleasant, SC for an evaluation. Meg met with Debbie Seabrook on December 16, 2008 and a follow up appointment. She was asked to submit a urine drug screen at the time of the session and per the evaluator's report, she refused. Meg was diagnosed with polysubstance abuse and recommended for inpatient treatment, for not less than 30 days, which she refused.

Meg reported moving to Florida to live with her sister for the next year. She has an active license to practice nursing in the state.

Based on her refusal to submit a urine drug screen refusal of inpatient treatment, RPP respectfully recommends emergency action as deemed appropriate in order to protect the public health, safety and welfare.

CC: Ron Cook

300-A Court St. Pwter Blvd.
Suite 110
Columbia, S.C
29210

Telephone
(803) 896-3700

fax
(803) 896-3710

24-hour toll-free
number: 1-800-
1-877-319-2094
www.rpp.org

Deborah J. Seabrook, M.Ed., LPC

356 Seventh Avenue
Mt Pleasant, South Carolina 29464
Phone: 843 856 8855 Fax: 843 856 5205

- *Licensed Professional Counselor
- *Certified Addictions Forensics Counselor
- *Certified Trauma Specialist
- *Family Court Mediator

January 12, 2009

Tia Cooper, MA CAC2
300A Outlet Point Rd
Suite 100
Columbia, SC 29210

RE: Meg McCoy 1444829765

Meg presented as a bright, well cared for young woman who was applying for a career position rather than an evaluation.

As Meg began to tell her story about being intoxicated at work, she quickly changed the responsibility for her behavior to the break-up of a five year relationship.

Meg, who is originally from New Jersey, has a mother who is in recovery from alcoholism and a father who was formally a priest.

She did state she felt depressed, even though she has been taking Effexor 150m.

As to her MMPI-2, the test was marginally valid due to Meg trying to present herself in an overly positive light. She tries to deny problems and takes little time to explain herself. The MMPI-2 reported that this individual is rigid and inflexible, and is more than likely not open to self-examination.

In terms of symptoms, she is impulsive and immature, and she tends to seek immediate gratification of her wishes, often without concern for the

Page 2

Meg McCoy

consequences of her actions. She is pleasure directed and seeks this self-gratification at the expense of the welfare of others. She is the type of client who does not learn from her mistakes--even if she is punished for them.

Meg maintains only very superficial relationships. Because of her hedonistic and self-centered characteristics, she is quite insensible to the needs of others. Over the last few years, she has had multiple plastic surgeries to make herself more desirable.

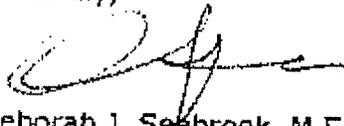
At the end of the session, I asked her to take a drug screen. She refused.

In summary, Meg's diagnosis follows:

- Axis I Body Dysmorphic Disorder
 Polysubstance abuse--not in remission
- Axis II Antisocial Personality Disorder
- Axis III None
- Axis V 50

At this time, I would recommend in-patient treatment for a minimum of 30 days with follow-up for a period of 5 years.

Sincerely,



Deborah J. Seabrook, M.Ed, LPC

DJS/lhh

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

IN THE MATTER OF:

Meghan E. McCoy, RN

License # 89992

Case # NB-2008-578

Respondent

**VOLUNTARY SURRENDER OF
LICENSE TO PRACTICE
NURSING
(Public)**

WHEREAS, Respondent is a Registered Nurse, registered in South Carolina and subject to the jurisdiction of the South Carolina Board of Nursing (hereinafter the Board); and

WHEREAS, on or about December 9, 2008, while employed at East Cooper Regional Medical Center Respondent admits that she diverted Demerol from the Pyxis machine for her personal use; and

WHEREAS, in December of 2008 Respondent was assessed through the Recovering Professional Program by Dr. Seabrook. She received a diagnosis for opiate dependence and major depression. Respondent entered Cornerstone Recovery for treatment in January of 2009; and

WHEREAS, on or about March 31, 2009, Respondent left Cornerstone due to financial considerations and was subsequently discharged from RPP; and

WHEREAS, Respondent has advised that she wishes to cease the practice of nursing immediately, waive further proceedings, and give up the right to practice nursing in South Carolina; and

WHEREAS, Respondent understands that she has the right to a hearing and to be represented by counsel in this matter. Respondent understands and agrees that by entering into this Voluntary Surrender, she voluntarily relinquishes any right to judicial review. Respondent freely, knowingly, and voluntarily waives any and all such rights and further proceedings in this matter; and

WHEREAS, IT IS FURTHER UNDERSTOOD AND AGREED that this Agreement does not satisfy, prejudice, or stay any disciplinary action currently pending before the Board or which may be filed in the future.

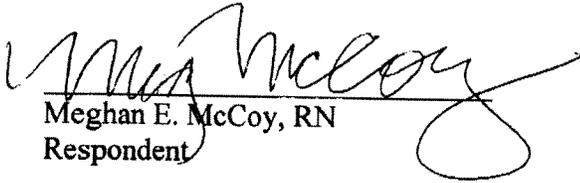
WHEREAS, it is understood and agreed that, pursuant to the South Carolina Freedom of Information Act, this is a public document.

THEREFORE, Respondent does hereby voluntarily surrender her right to practice nursing in South Carolina, effective immediately upon acceptance by the Board.

IT IS FURTHER UNDERSTOOD AND AGREED that if Respondent should ever seek re-licensure from the Board again, she will have the burden of satisfying the Board she is

safe to practice nursing, and that she will agree to any and all restrictions upon her license the Board may deem necessary at that time.

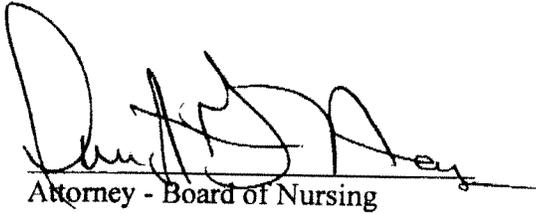
WE AGREE:


Meghan E. McCoy, RN
Respondent

4/13/09
Date


WITNESS OR ATTORNEY

04/13/2009
Date


Attorney - Board of Nursing

4/13/09
Date

ACCEPTED by the Board this

**STATE BOARD OF NURSING OF
SOUTH CAROLINA**

12th Day of May, 2009



C. Lynn Lewis, RN, EdD, MHS
President of the Board

CERTIFICATE OF SERVICE BY MAIL

This is to certify that the undersigned has this date served this document in the above entitled action upon all parties to this cause by depositing a copy herof, 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: 1012 Rosewood Ln, Mt Pleasant SC 29464

This 20 day of May, 2009
By: 
Printed name, title & signature

DOROTHY BUCHANAN

MORRIS VILLAGE

SCDMH DIVISIC F INPATIENT SER ES COLUMBIA H TAL PROGRAM I TIFICATION AND MARY SHEET

LAST NAME MCCOY	FIRST NAME MEGHAN	MI E	MAIDEN NAME/ ALIAS		DOB & AGE 01/20/1979 30	TYPE CASE VOLUNTARY-OTHE	MED RECORD # 10184715
ADMISSION DATE & TIME 06/18/2009 11:18 AM		RACE WHITE	SEX F	MAR ST SINGLE	RESIDENT'S ADDRESS 26 WILLOWBEND DRIVE MURRELLS INLET, SC 29576		COUNTY OF RESIDENCE HORRY
PHONE NUMBER H 843-357-0167 W		RELIGION PROTESTANT		PRIMARY LANGUAGE 01 ENGLISH VERY WELL		EDUCATION COLLEGE GRADU.	OCCUPATION UNKNOWN
PLACE & ADDRESS OF EMPLOYMENT UNKNOWN				SOC SECURITY # 144-82-9763	MEDICARE #	MEDICAID #	
OTHER INS - NAME/POLICY #			VETERAN / BRANCH / SERVICE DATES			DATE / CHANGE OF ADMISSION STATUS	

NEXT OF KIN / INTERESTED PERSON MCCOY, EUGENE / FATHER	ADDRESS 26 WILLOWBEND DRIVE HORRY, SC 29576	PHONE #: H 843-357-0167 W A#1
---	---	--

SCREENED BY MHC / CLINIC YES NO REFERRED BY/ POINT OF ORIGIN REFERENCE PHONE #

CENTER / CLINIC NAME:

ATTENDING PHYSICIAN CARR, LADY	SOCIAL WORKER	FACE SHEET COMPLETED BY BPH DEONDEA M BROWN
-----------------------------------	---------------	--

MV CASE MANAGER: *James James MHC III* MV INTAKE COUNSELOR: *Alvin Jones, MHC*

REASON FOR HOSPITALIZATION:

DISCHARGE DIAGNOSIS:

AXIS I: *Opiate dependence, Depression*

AXIS II: *depressed*

AXIS III: *von Willebrand's Disease - Emorrhagia*

AXIS IV: *Chronic substance abuse*

AXIS V: GAF SCORE: *100 on adm*

CONDITION OF DISCHARGE: *Stable*

DISCHARGE DATE/TIME: *7/22/09* PHYSICIAN SIGNATURE: *W. Thomas Knicker*



MCCOY, MEGHAN E. VO10184715
6/18/2009
1/20/1979 WHITE F SINGLE
MV HORRY

ALLERGY FLAG

OTHER FLAG

Adm. This Facility
01

Total Adm.
01

SCDMH DIVISION OF INPATIENT SERVICES
COLUMBIA HOSPITAL PROGRAM IDENTIFICATION AND SUMMARY SHEET

JUSTIFICATION FOR TWO OR MORE ANTIPSYCHOTIC MEDICATIONS:

PHYSICIAN'S SIGNATURE:

Discharge Medications: see Orders for Pass / Discharge medications (M-208EEEEEE)

DISPOSITION & RECOMMENDATIONS FOR NEXT LEVEL OF CARE / GOALS & TREATMENT ISSUES (Include patient discharge address if different from information on page 1) AA, NA, Peer support, Social Work & benefits follow-up, follow-up on medical conditions):

① Maintain total abstinence ② Attend outpatient as scheduled
③ Go to AA / NA daily ④ Obtain a female sponsor and work the 12 Steps ⑤ No ^{new} relationships with a male - set healthy interpersonal boundaries ⑥ Do a daily inventory - checking thoughts, feelings, behaviors, & attitudes

CLINICIAN SIGNATURE: Jamey James MHCII DATE: 6 7.21.09

NEXT LEVEL OF CARE PROVIDER APPOINTMENT - document primary appointment here (if discharged to another inpatient facility, jail, or prison, the appointment date should match the discharge date.)

NAME: RPP - Tia Cooper ADDRESS: _____ PHONE: 896 4765
(Center/Case Manager) Thursday
APPT DATE: Wednesday 7-22-09 TIME: 7:30-11:00 SIGNATURE: Jamey James MHCII

PATIENT SIGNATURE: Meg McCoy DATE: 7/21/09

Document additional appointments as needed (A&D Commission, A&D Counselor, VR, etc):

NAME: Georgetown Co. ADAC ADDRESS: 1423 Winyah St. Georgetown PHONE #: (843) 546-6081
APPT DATE: Thurs 7-23-09 TIME: 8-4-09 10:00 SIGNATURE: _____

NAME: Dr. Christine Lloyd ADDRESS: Ratlidge Ave. Charleston PHONE #: (843) 577-5012
APPT DATE: Mon 8-3-09 TIME: 11:40 SIGNATURE: Meg McCoy

Items below are to be transmitted to the next Level of care provider (attach verification of transmission)

Continuing Care Plan documents transmitted:
1. Identification & Summary Sheet
2. Orders for Pass / Discharge Medications
3. Nursing Discharge Summary & Instructions
4. Universal Medication Sheet(s)

MCCOY, MEGHAN E. VO10184715
6/18/2009 1
1/20/1979 WHITE F SINGLE
MV HOBBS

OTHER FLAGS

Morris Village Clinical Assessment

Interpretive Summary

Page 1

Identifying Information:

Megham E McCoy is a 30 year-old, single White female from Murrells Inlet, SC. She was admitted to Morris Village on 06/18/2009 as a voluntary admission. This is her 1st admission to Morris Village and her 1st to a DMH facility. Megham was referred to Morris Village by Sharon Paul from Horry County Alcohol and other Drug Abuse Center in Horry, SC.

Central Themes:

The following central themes are identified for this patient:

Ms McCoy was voluntarily admitted to Morris Village on 6/18/09. She has recontacted RPP after being discharged from the program due to leaving inpatient treatment AMA. She is required to successfully complete this program in order to reconnect with RPP. The patient reports that she began struggling with IV drug use after a breakup with her boyfriend. Despite inpatient treatment, it appears that the patient began using in treatment and continue to use upon her return home. During this admission, the central theme will be disease-concept education, relapse prevention planning, and coping skills training.

The above themes are based on review of the:

- Activity Therapy Assessment
- Clinical Assessment
- Collateral Information
- Nursing Assessment
- Medical Assessment
- Patient's Personal Assessment
- Conversation with the Patient

Strengths:

Strengths/abilities as identified by the patient and casemanager include:

family support, previous AA/NA attendance, a previous sponsor, a belief in a higher power, a counselor who helped with admission, a place to go upon discharge, can read and understand complex ideas, strong survival skills, can recognize when lying to self and others, can follow directions, willing to learn how to live without chemical use, trustworthy when sober, faith, determination, good sense of humor, easily share thoughts and feelings with others, respect others' privacy, willing to accept and act on advice from others, willing to fulfill treatment obligations

Needs:

learn how to make clean and sober friends, group counseling, educational groups, AA/NA, recreational activities, outpatient referrals, disease concept education, learn triggers, relapse prevention plan, coping skills, spirituality

Factors likely to affect the course of treatment:

The patient's level of motivation for change

ASAM Dimension Ratings:

At this time the patient's ASAM dimension ratings are as follows:

1) Acute Intoxication/Withdrawal Potential:

Patient Name:	McCoy, Megham E
Hospital Number:	0184715
Admission Date:	6/18/2009
Case manager:	James

Morris Village Clinical Assessment

Interpretive Summary

ASAM I Severity Rating: Low

Rationale: Despite a history of withdrawal symptoms, the patient reports no current symptoms of withdrawal. She is being monitored in the detox unit and will be moving to a rehab bed shortly.

2) Biomedical Condition/Behavioral Problems:

ASAM II Severity Rating: Medium

Rationale: The patient reports a history of Hypoglycemia and Von Willebrands (a bleeding disorder) that is controlled with diet and OTC medications.

3) Emotional Condition/Behavioral Problems:

ASAM III Severity Rating: Medium

Rationale: She indicated that she was treated inpatient for depression and continues to see a private psychiatrist for depression for which she is prescribed psychotropic medications. She reports taking an overdose (12/08), denies a history of abuse, legal problems, or learning issues. She indicates surrendering her RN license and involving herself with RPP.

4) Treatment Acceptance/Resistance:

ASAM IV Severity Rating: Medium

Rationale: Ms McCoy was voluntarily admitted to Morris Village and reports wanting inpatient treatment to learn new tools for recovery. She suggested that she has a problem with drugs but not alcohol which has caused financial, familial, and vocational problems

5) Relapse Potential:

ASAM V Severity Rating: High

Rationale: The patient reports being inpatient at Cornerstone for 2 month and going to Shoreline for an assessment prior to admission here. she report following through with treatment recommendations and abvng 6 months clean. This report is inconsistent with that of treatment professionals in the community.

6) Recovery Environment/Family Support:

ASAM VI Severity Rating: High

Rationale: The patient reports living with her parents in Murrells Inlet where she has reliable transportation and plans to return upon discharge. She indicated that she has not worked since 2009 and that her parents are financially supporting her.

Projected Length of Stay:

The projected length of stay 30 days.

The focus of inpatient treatment will be on the following goals:

- (1) The patient will be educated on tools for recovery and relapse prevention so that she will be equipped to make healthy life

Patient Name: McCoy, Meghan E
 Hospital Number: 0184715
 Admission Date: 6/18/2009
 Casemanager: James

Morris Village Clinical Assessment

Interpretive Summary

Page 3

choices.

(2) The patient will develop positive leisure skills.

Patient's current level of care: III.5 Clinically Managed (High)

During treatment, the patient will be referred to the following:

- Activity Therapy
- Recovery Dynamics/Pt Education
- Relapse Prevention education
- Group Therapy
- Vocational Rehabilitation
- NA
- AA
- Alcohol & Drug Abuse Commission

Casemanager: _____

James James MHC III

Date: _____

6.25.09

Patient Name: McCoy, Meghan E
 Hospital Number: 0184715
 Admission Date: 6/18/2009
 Casemanager: James