



October 2011

Texas Board of Nursing Bulletin

A Quarterly Publication of the Texas Board of Nursing

The mission of the Texas Board of Nursing is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a nurse in the State of Texas is competent to practice safely. The Board fulfills its mission through the regulation of the practice of nursing and the approval of nursing education programs. This mission, derived from the Nursing Practice Act, supersedes the interest of any individual, the nursing profession, or any special interest group.

BON Staff Recognized at NCSBN Delegate Assembly Meeting in Indianapolis

Mary Beth Thomas Recognized with 2011 Exceptional Achievement Award from NCSBN

Mary Beth Thomas, PhD, RN, Texas Board of Nursing (BON) Director of Nursing Practice and Education, received the Exceptional Contribution Award from the National Council of State Boards of Nursing (NCSBN) at the Delegate Assembly and Annual Meeting of the NCSBN held in Indianapolis, Indiana, August 3-5, 2011.



Mary Beth Thomas, PhD, RN

Dr. Thomas was selected for the award because of her exceptional commitment to ensuring patient safety in nursing practice. As a member and current Chair of the NCSBN Taxonomy of Error, Root Cause Analysis Practice Responsibility (TERCAP) Committee, she has been a leader in gathering TERCAP data in Texas by training staff in the data collection process and increasing utilization of the tool, which captures detailed data regarding practice breakdown. TERCAP data analysis identifies nursing errors and, at the same time, allows for the analysis of complex system-related issues that often occur within the health care environment which may have contributed to nursing errors. Dr. Thomas has also trained staff of other boards of nursing on the use of the TERCAP tool and methods of developing inter-rater reliability.

Dr. Thomas has served as Director of Nursing Practice and Education for the BON for the past seven years and served as Chairperson of the NCSBN TERCAP Committee since 2010.

Her duties at the Texas BON include overseeing the daily operations, pro-

cesses and outcomes of the Nursing Department, as well as promoting the laws and rules of the BON pertaining to

Mark Majek Elected to NCSBN Leadership Succession Committee

Mark Majek, MA, PHR, Director of Operations for the Texas BON, was elected to serve on the NCSBN Leadership Succession Committee for the NCSBN at the NCSBN Delegate Assembly and Annual Meeting held in Indianapolis, Indiana, August 3-5, 2011. The NCSBN Leadership Succession Committee is responsible for identifying and developing qualified leaders who serve the purpose, mission, vision and values of the organization; advance and promote excellence in nursing regulation; sustain and evolve continued success and viability of the NCSBN; and embrace and cultivate a culture of service and stewardship. Mr. Majek was eligible for the position due to his experience as a former NCSBN Committee Chairperson. Mr. Majek received the Meritorious Achievement Award from the NCSBN in 2007 and served as Director of Area



Mark Majek, MA, PHR

III for the NCSBN from 2001 until 2005. Area III includes the following states: Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Virginia, and Texas.

Mr. Majek has served as the Director of Operations for the Texas BON for the past 24 years. His duties include oversight of finance, information technology, licensing, customer support, and publications. He serves as the sole Human Resources Practitioner for the BON and is certified as a Professional in Human Resources by the Society for Human Resource Management. He is currently the Chair of the Small State Agency Task Force and has served as past Chair of the Texas State Human Resource Association.

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Katherine Thomas Designated as Fellow to American Academy of Nursing

On October 15, 2011, Katherine Thomas, MN, RN, was designated as Fellow to the American Academy of Nursing (AAN) at their 38th Annual Meeting and Conference held in Washington, DC. The AAN is a professional organization that generates, synthesizes, and disseminates nursing knowledge to contribute to health policy and practice for the benefit of the public and the nursing profession. Members of the AAN are invited on the basis of leadership and accomplishments, and are designated as Fellows of the American Academy of Nursing (FAAN). There are approximately 1,500 members who are nursing leaders in education, management, practice, and research. Invitation to fellowship is more than recognition of one's accomplishments within the nursing profession, as AAN Fellows also have a responsibility to contribute their time and energies to the Academy, and to engage with other health care leaders outside the Academy in transforming America's health care system.

Katherine Thomas currently serves as Executive Director for the Texas Board of Nursing (BON). Ms. Thomas joined the Texas BON in 1989 and became Executive Director in 1995. She also represents nursing at the national level through her service as Director-at-Large for the National Council of State Boards of Nursing (NCSBN). She is serving her second term as Director-at-Large following election to the position in 2008 by the NCSBN Delegate Assembly and again in 2010. She has served as the NCSBN Representative to the Advanced Practice Registered Nurse (APRN) Joint Dialogue Group from 2007-2008; this group developed the Consensus Model for APRN Regulation. She co-chaired the NCSBN Nursing Practice and Education Committee from 1999-2001, served on the NCSBN APRN Advisory Committee from 1995-2007, as well as the NCSBN task force studying the Feasibility of Developing a Core Competency Examination for Nurse Practitioners from 1993 to 1995. She has also met with states considering adoption of the Nurse Licensure Compact offering insights on how the Texas BON adapted its operations in response to passage of Compact legislation in the year 2000.



Catherine L. Gilliss, DNSc, RN, FAAN (Right), President of the American Academy of Nursing (AAN) presenting AAN Fellowship Certificate to new Fellow Katherine Thomas, MN, RN, FAAN (Left). Photo by Sonny Odom.



The Texas Board of Nursing

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Lubbock

Executive Director

Katherine Thomas, MN, RN, FAAN

Texas Board of Nursing Meeting Schedule

2011-2012 Board Meeting Dates

October 27-28, 2011
January 19-20, 2012
April 19-20, 2012
July 19-20, 2012
October 18-19, 2012

All Board and Eligibility & Disciplinary Committee Meetings will be held in Austin at the William P. Hobby Building located at 333 Guadalupe, Austin, Texas, 78701.

2011-2012 Eligibility and Disciplinary Committee Meeting Dates

November 8, 2011
December 13, 2011
February 14, 2012
March 20, 2012
May 8, 2012
June 12, 2012
August 14, 2012
September 11, 2012
November 13, 2012
December 11, 2012

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Summary of Actions

A regular meeting of the Board of Nursing was held July 21-22, 2011, in Austin. The following is a summary of Board actions taken during this meeting.

A proposed amendment to 22 Tex. Admin. Code §223.1, pertaining to *Fees* was approved by the Board at its July 21-22, 2011 meeting for submission to the *Texas Register* for public comment and for adoption if no negative comments or a request for a public hearing were received. This amendment was proposed under the authority of the Occupations Code §301.151 and §301.155 and is necessary to implement the requirements of House Bill 1, enacted by the 82nd Legislature, Regular Session, effective September 1, 2011, which establishes the Board's budget for the 2012-2013 biennium. The proposed amendment was published in the

Texas Register on August 19, 2011 (36 TexReg 5180), and the comment period ended on September 19, 2011. No comments were received and the adoption was published in the *Texas Register* on October 7, 2011, and became effective on October 11, 2011.

Proposed new 22 Tex. Admin. Code §217.21, pertaining to *Remedial Education Course Providers and Remedial Education Courses* and an amendment to §223.1, pertaining to *Fees*, were approved by the Board at its April 28-29, 2011 meeting for submission to the *Texas Register* for public comment and for adoption if no negative comments or a request for a public hearing were

received. The proposed new section and amendments were published in the *Texas Register* on May 27, 2011, and the comment period ended on June 27, 2011. Written comments were received to proposed §217.21 and a public rule hearing was held on June 29, 2011. The comments were considered by the Board at its July, 2011 meeting. The Board approved new section 22 Tex. Admin. Code §217.21, and amended §223.1, and the adoption of the proposed amendments was published in the *Texas Register* on August 5, 2011 and became effective on August 11, 2011.

Nursing Education Actions - July 2011 Board Meeting

Reviewed Reports on:

Status of Inquiries, Proposals, and Approval Status of new Nursing Education Programs;
Status Report on Programs with Sanctions; and
Communication Activities with Nursing Education Programs.

Accepted Reports on:

St. Philips College, San Antonio, Associate Degree Nursing Program Teach-Out Report; and
Notification of Closure of Nursing

Program - Central Texas College, Brady, Vocational Nursing Program.

Approved Changes in Processes for Managing New Nursing Program Proposals

Petition for Waiver of Director Qualifications:

San Jacinto College South, Houston, Associate Degree Nursing Program.

Changed Program Approval Status from Initial to Full Approval:

Fortis College, Houston Vocational Nursing Education Program.

Granted Initial Approval to Establish a New Associate Degree Nursing Program:

Everest College, Fort Worth; and
Mountain View College, Dallas.

Granted Initial Approval to Establish a New Baccalaureate Degree Nursing Program:

Angelo State University, San Angelo;
University of St. Thomas, Houston.

Did you know....

As we enter the 2011–2012 flu season, are you prepared? Information is available on the Centers for Disease Control and Prevention web site related to the National Influenza Vaccination Week (NIVW) to be held December 4-10, 2011.

Resources for seasonal influenza information include:

- U.S. Department of Health and Human Services: www.flu.gov/
- Centers for Disease Control and Prevention: www.cdc.gov/flu/
- Texas Department of State Health Services: www.dshs.state.tx.us/
- Immunizations: www.dshs.state.tx.us/immunize/default.shtm
- Flu (Influenza): www.dshs.state.tx.us/idcu/disease/influenza/

DADS Nurses Implementing Senate Bill 1857 Pilot Program

Registered nurses (RNs) and licensed vocational nurses (LVNs) who serve persons with intellectual and developmental disabilities and practice in the Home and Community-Based Services (HCS) and Texas Home Living (TxHmL) waiver programs, as well as small and medium sized Intermediate Care facilities (ICF/IDD), will be implementing Senate Bill (SB) 1857, enacted during the 82nd Legislative Session. The Texas Department of Aging and Disability Services (DADS) has responsibility for regulation of this new law which is found in Chapter 161 of the Human Resources Code.

The new law will allow RNs to determine if unlicensed direct care staff can administer oral, topical, and metered-dose inhaler medications without delegating each of these administrations. Through comprehensive assessments and periodic assessments in response to changes in condition, RNs will determine: (1) if individuals' health conditions are stable and predictable and (2) whether it is safe to permit unlicensed direct care staff to administer

these medications. RNs, or LVNs under the supervision of RNs, must either train the unlicensed direct care staff to safely administer medications or determine they are competent, through return demonstration of proper technique. For all other medications, RNs must follow the Board of Nursing (BON) delegation rules.

SB 1857 also establishes that the BON and DADS will conduct a pilot program to evaluate the safety and efficacy of LVNs providing on-call nursing services by telephone to individuals receiving services in the HCS and TxHmL waiver programs and to individuals residing in small and medium ICF/IDD facilities. The pilot program will continue through September 1, 2015. For more information about SB 1857, contact DADS at www.dads.state.tx.us, and then select *Doing Business With DADS*, then *Resources for DADS service providers*. For questions related to nursing licensure, please e-mail inquiries to Sb1857@bon.texas.gov.

New Position Statements Approved by Board

In July 2011, the Interpretive Guideline for the Licensed Vocational Nurse (LVN) Scope of Practice under Rule 217.11 was retired in order to establish two new comprehensive resources for nurses and their employers. Position Statement 15.27, The LVN Scope of Practice, and Position Statement 15.28, The Registered Nurse (RN) Scope of Practice, were approved by the BON to provide accurate and up-to-date interpretations of the nursing licensure laws. The Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgments, and Behaviors and 22 TAC Rule 217.11, Standards of Nursing Practice, serve as the basis for the new position statements.

The position statements offer direction and recommendations for nurses and their employers regarding the safe and legal scope of practice for LVNs and RNs and will promote an understanding of the differences in educational preparation between the RN and LVN. The position statements may also serve as a valuable resource to other regulatory agencies who must write rules impacting the scope of practice for LVNs and RNs. The position statements are located on the Board website, www.bon.texas.gov under *Nursing Practice*, then *Position Statements*.

Advisory Committee Update

Advanced Practice Nursing Advisory Committee Update

The Advanced Practice Nursing Advisory Committee (APNAC) met on October 3, 2011 in Austin to continue to discuss its charge from the Board regarding the ability of Advanced Practice Registered Nurses to perform physical and psychological evaluations under *Texas Occupations Code*, § 301.4521 and Board Rules and guidelines. Recommendations for the Board's consideration will be presented at a future Board meeting.

Deferred Disciplinary Action Pilot Program Advisory Committee

The Deferred Disciplinary Action Pilot Program Advisory Committee (DDAPPAC) met on June 29, 2011. The DDAPPAC was formed following passage of SB 1415, enacted by the 81st Texas Legislature effective September 1, 2009, to oversee and evaluate the deferred disciplinary action pilot program as an alternative form of Board discipline for certain violations of the Nursing Practice Act and Board rules. The Committee plans to meet again in December. The committee, which consists of 13 members is chaired by Poldi Tscirch, PhD, RN, BC, who also serves as Chair of the Board of Nursing Eligibility and Disciplinary Advisory Committee.

Reminder

When calling the Texas Board of Nursing and asking for a return phone call, please leave your full name, telephone number to include the area code, and a brief description of the request. Often times, staff cannot understand the caller's name and telephone number because of cell phone connections. This may result in delay of returning a call or calls not being returned at all. For clarification, speak slowly and repeat the phone number, including the area code.



Legislative Summary: 82nd Regular Texas Legislative Session



The 82nd Regular Session of the Texas Legislature concluded May 30, 2011. Six bills were passed into law that amended the Nursing Practice Act. Other bills relating to the practice of nursing in Texas were also enacted. The following is a summary of some of the bills impacting the practice of nursing in Texas.

Bills Amending Nursing Practice Act

Patient Advocacy Protections

Senate Bill (SB) 192 by Senator Jane Nelson amended the Nursing Practice Act (NPA) Sections 301.352, 301.402, 301.4025, 301.412, 301.413, 303.001, and 303.005; and added Section 301.4011. This bill seeks to improve patient care by expanding the immunities from liability for a person who makes a report required or authorized by the NPA related to patient safety concerns in good faith. Includes immunity from civil and criminal liability so as not to deter a nurse from making a report that could enhance or promote patient safety. Extends non-retaliatory protections for nurses who refuse an assignment or make a good faith report related to patient care or request a Nursing Peer Review Committee determination (Safe Harbor). The same protections apply to nurses who advise other nurses about their rights and obligations to report in good faith. The appropriate licensing agency may impose an administrative penalty not to exceed \$25,000.00 against a person who retaliates. Defines a good faith report. Permits a person to file a counterclaim to recover costs. Amends the definition of Nursing Peer Review to include this information. Effective September 1, 2011. The Board approved proposed changes to Board of Nursing (BON) Rules 217.19 and 217.20 in response to passage of SB 192 at the October 2011 Board Meeting. The proposed rules will be published in the *Texas Register* at a later date.

Practice of Nursing

SB 193 by Senator Jane Nelson amended NPA Sections 301.207, 301.261, 301.352, 301.4521, 301.455, 301.4551; added Section 303.012; and repealed Section 301.355. This bill extends protection of confidentiality to certain information for a Petition for Declaratory Order; allows nurses under 65 years of age to apply for retired status and use the appropriate title signifying this status; authorizes the disclosure of the results of a physical or psychological exam to determine fitness to practice nursing; and allows the BON to develop a standardized error classification system for use by a Nursing Peer Review Committee. Effective September 1, 2011. The Board approved proposed changes to BON Rule 217.9 in response to passage of SB 193 at the October 2011 Board Meeting. The proposed rules will be published in the *Texas Register* at a later date.

Non-substantive Changes to BON Statutes/Elimination of Redundant Agency Reporting Requirements

SB 1179 by Senator Jane Nelson repealed NPA Section 301.165. The BON is no longer required to prepare annual reports on pilot programs, as well as redundant annual reports, to the Legislature and Governor's Office concerning all funds received and disbursed. Effective June 17, 2011. **SB 1303** by Senator Royce West amends Section 303.005 of the NPA, reenacting changes made by SB 993 enacted during the 80th Regular Texas Legislative Session. Effective September 1, 2011.

Tick-Borne Illnesses

House Bill (HB) 2975 by Rep. Todd Hunter and **SB 1360** by Senator Chris Harris (identical) amend Section 301.304 of the NPA. Nurses treating patients with tick-borne diseases are encouraged to participate in continuing education related to treatment of tick-borne disease. Nurses who are subsequently investigated related to treatment of patients with tick-borne illnesses can show participation in continuing education within the two years prior to the investigation for consideration during the investigation. Effective September 1, 2011.

continued on next page

Legislative Summary - continued from previous page**Other Bills Relating to Nursing Practice****Alternative Demonstration of Competency for Spouses of Active Duty Military**

SB 1733 by Senator Leticia Van De Putte. Amends the Occupations Code to require a state agency that issues a license to adopt rules for the issuance of the license to an applicant who is the spouse of a person serving on active duty as a member of the armed forces of the United States and either holds a current license issued by another state that has licensing requirements that are substantially equivalent to the requirements for the license or, within the five years preceding the application date, held the license in Texas that expired while the applicant lived in another state for at least six months. Effective June 17, 2011. The Board approved proposed changes to BON Rules 217.5 and 217.6 in response to passage of SB 1733 at the October 2011 Board Meeting. The proposed rules will be published in the *Texas Register* at a later date.

APN Authority - Handicapped Parking Placards

HB 2080 by Rep. Tracy King. Extends the authority of physician assistants and advanced practice registered nurses acting under physician delegation to write handicapped parking placards. Effective June 17, 2011.

CE Requirements for Nurse Aides

SB 795 by Senator Jane Nelson. Seeks to improve the quality of long-term care and specifies requirements for a nurse aide to be listed on the registry. A nurse aide must complete a Department of Aging and Disability Services (DADS) approved training program with at least 100 hours of course work. The listing expires every two years. In order to renew, a nurse aide must complete 24 hours of in-service education every two years to include geriatrics and Alzheimer's Disease training. Effective September 1, 2011.

Chronic Disease Treatment

SB 293 by Senator Kirk Watson. If cost-effective, the Texas Health and Human Services Commission will establish a statewide telehealth program to provide services to patients with chronic diseases for the purpose of avoiding hospitalization. Nurses will play a key role in reviewing patient data and working in coordination with the physician to ensure the patient is following and adhering to the treatment plan. Effective September 1, 2011.

DADS Pilot: LVN On-Call Services

SB 1857 by Senator Judith Zaffirini. Amends the Human Resource Code governing DADS to authorize unlicensed personnel who have been trained and deemed competent by nursing staff to administer certain medications. DADS and the BON will conduct a pilot program to evaluate LVNs providing on-call services by telephone to clients who are under the care of the LVN. Effective September 1, 2011. (See related article on page four)

Dispensing of Dangerous Drugs

HB 2069 by Rep. Elliott Naishtat. Authorizes a pharmacist to dispense up to a 90-day supply of a dangerous drug pursuant to a valid prescription that specifies the dispensing of a lesser amount followed by periodic refills of that amount if certain conditions are met. Effective September 1, 2011.

Food Allergies for Students

SB 27 by Senator Judith Zaffirini. Schools will be required to develop policy related to the care of students with food allergies and risk for anaphylaxis based on guidelines from the Commissioner of State Health Services in consultation with an ad hoc advisory committee. Effective June 17, 2011.

Higher Education

HB 3025 by Representative Dan Branch. Students enrolled in an associate or bachelor's degree program at an institution of higher education are required to file a degree plan not later than the end of the second semester or term in which the student has earned 45 semester credit hours in order to be awarded the degree. Effective September 1, 2011.

Practice Q & A: Abbreviations in Continuing Nursing Education

Q: What do the following abbreviations mean: CE, CEU, CNE, and CME? Which ones can be used to meet nursing continuing competency requirements?

A: Each of these abbreviations has a specific meaning, but are commonly interchanged. Continuing Education (CE) may be used in reference to general continuing education for many different professions. It is not specific to continuing education for nurses. CE is defined in Board Rules as "programs beyond the basic preparation which are designed to promote and enrich knowledge, improve skills, and develop attitudes for the enhancement of nursing practice, thus improving health care to the public."¹ On the other hand, use of the term continuing nursing education (CNE) makes it clear that a continuing education activity is specifically for nurses. If delivered by an approved provider, the CNE could be used by a nurse to meet continuing competency requirements if the CNE is applicable to the nurse's area of practice. **CNE is the appropriate phrase in relation to continuing nursing education.**

Contact hours are the specific unit of measurement applied to CNE. A contact hour is defined as "sixty consecutive minutes of participation in a learning activity."² The term continuing education unit (CEU) is a generic form of measurement not directly applicable to the nursing contact hour requirement. Health care professionals, including social workers, are awarded CEUs. A CEU equals 10 contact hours. A contact hour may be defined defined as 60 or 50 minutes of a clock hour depending upon the approving organization.

Continuing Medical Education (CME) is not acceptable for the RN or LVN to use to meet continuing competency requirements. However, category one CME is acceptable for the advanced practice registered nurse (APRN) when in the APRN's advanced role and population focus area are recognized by the Board.³

Footnotes

¹Board Rule 216.1(12)

²Board Rule 216.1(11)

³Board Rule 216.3(c)

Legislative Summary - continued from previous page

Texas Medical Board Complaints

HB 680 by Rep. Charles Schwertner. The Texas Medical Board (TMB) can no longer act on complaints more than seven years old unless the care was provided to a minor. The TMB is prohibited from accepting anonymous complaints. Doctors who are the subject of a complaint filed by an insurance agent, insurer, pharmaceutical company, or third-party administrator would receive the name and address of the complainant no later than 15 days after the complaint is filed, unless it jeopardizes an investigation. Effective September 1, 2011.

Nursing Education

SB 794 by Senator Jane Nelson. Amends the Texas Education Code to continue the current dedication of a portion of the Tobacco Lawsuit Settlement funds to support nursing education through August 31, 2015. Effective September 1, 2011.

Recertification for Sexual Assault Nurse Examiners

SB 533 by Senator Wendy Davis. Authorizes the Attorney General to establish a re-certification process for sexual assault nurse examiners. Effective September 1, 2011.

Test Accommodations for Dyslexia

SB 867 by Senator Deuell. For each licensing examination administered by a state agency, the agency is required to provide reasonable examination accommodations to an examinee diagnosed with dyslexia. Effective September 1, 2011. The BON approved proposed changes to Board Rule 217.22 in response to passage of SB 867 at the October 2011 Board Meeting. The proposed rules will be published in the *Texas Register* at a later date.

Know Your Board Members

Kathy Shipp, MSN, RN, FNP

Kathy Shipp of Lubbock represents Advanced Practice Registered Nursing on the Board of Nursing (BON). She is a nurse practitioner in private family practice and is a member of the Texas and South Plains Nurse Practitioner Association. She is also a member of the Sigma Theta Tau International Honor Society of Nursing, a volunteer with the Parkridge Pregnancy Center, a past speaker for Lubbock Teen Straight Talk, and was recently a member of the Texas Health Disparities Task Force. Ms. Shipp received a Family Nurse Practitioner Certificate from West Texas A&M University in Canyon, a Master's Degree in Nursing from the University of Texas at Austin, and a Bachelor of Science Degree in Nursing from West Texas A & M.



What motivated you to go into nursing?

My paternal grandmother always wanted to be a nurse. She had to help care for her family rather than achieve this dream. Her encouragement propelled me to nursing.

What motivated you to apply to be a member of the Board?

Throughout my career I have had a variety of experiences which have prepared me for this opportunity to serve on the BON. I worked in hospitals, clinics, public health, and home health. I taught in LVN, ADN, Diploma, and BSN programs and served as a preceptor for APRN students. I have provided care to patients of many socioeconomic levels. I have worked as an APRN in rural public health and in private practice. These experiences have provided me with a broad view of the profession of nursing and the patients we care for. My goal as a nurse has always been to help improve the health of as many people as possible. Being a BON member helps me make a difference and touch the lives of the nurses and people of Texas.

When did you decide that you wanted to become a nurse?

I always knew I wanted to help people. I had a cousin who was hearing impaired and seeing his struggles made me determined to help others reach their highest potential in life. After starting college, I realized nursing would give me this opportunity.



Ms. Shipp reviews patient records with Amber Carlisle, LVN, at the Brownfield Clinic in the South Plains Public Health District.

What does a typical day of work include?

For the last three years I have worked as the traveling APRN for South Plains Public Health District in Brownfield. I traveled approximately 450 miles a week to four clinics seeing low income teens, women and men. I did annual exams (primarily women), health promotion education, family planning, multiple screenings, and had oversight of four Class D pharmacies. In September, I changed to private practice with a family physician in Lubbock. I am a Family Nurse Practitioner. Caring for families is how I spend my day with the majority of my time spent in the care of women. Reducing travel time in my day allows me to spend more time in patient care which I enjoy.

Is there anything in particular about your work that you find rewarding?

The majority of my nursing career has been involved in caring for women and their families. One of the passions of my life is helping women "be the best they can be" so they can be successful in all aspects of their lives. Women take care of their families and many times do not take care of themselves. I work daily to increase my patients' knowledge of health and wellness for themselves and their families. At the end of the day, I feel I have made a difference for the families in my care.

What would people be surprised to know about you?

I love the outdoors. My husband and I play golf and ride together on his motorcycle.



ANA and NCSBN Unite to Provide Guidelines on Social Media and Networking for Nurses



The American Nurses Association (ANA) and the National Council of State Boards of Nursing (NCSBN) have mutually endorsed each organization's guidelines for upholding professional boundaries in a social networking environment.

The use of social media and other electronic communication is expanding exponentially; the latest statistics indicate that there are 150 million U.S. Facebook accounts and Twitter processes more than 250 million tweets worldwide on a daily basis. Social networking can be a positive tool that fosters professional connections, enriches a nurse's knowledge base, and promotes timely communication with patients and family members. ANA and NCSBN caution nurses that they need to be aware of the potential consequences of disclosing patient-related information via social media and mindful of employer policies, relevant state and federal laws, and professional standards regarding patient privacy and confidentiality.

"Nurses must recognize that it is paramount that they maintain patient privacy and confidentiality at all times, regardless of the mechanism that is being used to transmit the message, be it social networking or a simple conversation. As licensed professionals they are legally bound to maintain the appropriate boundaries and treat patients with dignity and respect," comments NCSBN Board of Directors President Myra A. Broadway, JD, MS, RN, executive director, Maine State Board of Nursing.

ANA is conducting a social media webinar, "Nursing Guidelines for Using Social Media" scheduled for Oct. 25 featuring Nancy Spector, PhD, RN, director, Regulatory Innovations, NCSBN, and Jennifer Mensik, PhD, RN, NEA-BC, ANA board member and administrator for Nursing and Patient Care Services at St. Luke's Health System in Boise, Idaho. Additional details and registration information are available on ANA's website: <http://www.nursingworld.org/>.

"Social Media can be a powerful tool, one with the potential to enhance or undermine not only the individual nurse's career, but also the nursing profession," said ANA President Karen A. Daley, PhD, MPH, RN, FAAN. "ANA hopes these principles provide a framework for all nurses to maintain professional standards in a world where communication is ever changing."

ANA's e-publication, "ANA's Principles for Social Networking and the Nurse," provides guidance to registered nurses on using social networking media in a way that protects patients' privacy, confidentiality and inherent dignity. This publication is available as a downloadable, searchable PDF, which is compatible with most e-readers. It is free to ANA members on the Members-Only Section of www.nursingworld.org; non-members may order the publication at www.nursesbooks.org. ANA also provides additional resources at its *Social Networking Principles Toolkit* page: <http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-Media/Social-Networking-Principles-Toolkit.aspx>.

NCSBN's white paper "A Nurse's Guide to the Use of Social Media" can be downloaded free of charge at the link at the following page: <http://us2.campaign-archive2.com/?u=a6c6f7da1b05b0e47f0cb6193&id=acf3a76186&e=d694391d2c>. NCSBN is also developing electronic and hard copy versions of a brochure for nurses and nursing students that details professional standards regarding patient privacy and confidentiality in social networking. A YouTube video on social media is also being produced. Both products will be available at the end of November 2011 and will be accessible via www.ncsbn.org free of charge. Excerpts from the white paper appear on the following pages.

Did you know....

Resources are available on the Board of Nursing web site and other web-based information sites to guide school nursing practice. Resources include:

Board of Nursing: www.bon.texas.gov:

- **Nursing Practice** ⇒ **Nursing Practice Information** ⇒ scroll to **Practice Setting/Specialty Area Specific** to access the documents listed for **School Nursing**
- **Nursing Practice** ⇒ **Scope of Practice** for general documents to assist a nurse with scope of practice decisions

Texas Department of State Health Services: <http://www.dshs.state.tx.us/>

- School Health Program

Nursing Organizations

- Texas School Nurses Organization: <http://txsno.org/>
- National Association of School Nurses: <http://www.nasn.org/>

Excerpts from NCSBN's White Paper Assist Nurses in Avoiding Trouble Using Social Media

In August, 2011, the National Council of State Boards of Nursing (NCSBN) released the white paper titled "A Nurse's Guide to the Use of Social Media", which discusses the increasing growth in use of electronic social media such as blogs, social networking sites, video sites, and online chat areas. Nurses need to be aware of the risks and consequences of using this increasingly popular form of communication to discuss patient information and/or outcomes. This report can be downloaded in its entirety from <http://us2.campaign-archive2.com/?u=a6c6f7da1b05b0e47f0cb6193&id=acf3a76186&e=d694391d2c> and includes illustrative examples of inappropriate usage of social media. Below is a portion of the NCSBN report.

Nurses often use electronic media both personally and professionally. Instances of inappropriate use of electronic media by nurses have been reported to boards of nursing (BONs) and, in some cases, reported in nursing literature and the media. This document is intended to provide guidance to nurses using electronic media in a manner that maintains patient privacy and confidentiality.

Social media can benefit health care in a variety of ways, including fostering professional connections, promoting timely communication with patients and family members, and educating and informing consumers and health care professionals.

Nurses are increasingly using blogs, forums and social networking sites to share workplace experiences particularly events that have been challenging or emotionally charged. These outlets provide a venue for the nurse to express his or her feelings, and reflect or seek support from friends, colleagues, peers or virtually anyone on the Internet. Journaling and reflective practice have been identified as effective tools in nursing practice. The Internet provides an alternative media for nurses to engage in these helpful activities. Without a sense of caution, however, these understandable needs and potential benefits may result in the nurse disclosing too much information and violating patient privacy and confidentiality.

Health care organizations that utilize electronic and social media typically have policies governing employee use of such media in the workplace. Components of such policies often address personal use of employer computers and equipment, and personal computing during work hours. The policies may address types of websites that may or may not be accessed from employer computers. Health care organizations also maintain careful control of websites maintained by or associated with the organization, limiting what may be posted to the site and by whom.

The employer's policies, however, typically do not address the nurse's use of social media outside of the workplace. It is in this context that the nurse may face potentially serious consequences for inappropriate use of social media.

Confidentiality and Privacy

To understand the limits of appropriate use of social media, it is important to have an understanding of confidentiality and privacy in the health care context. Confidentiality and privacy are related, but distinct concepts. Any patient information learned by the nurse during the course of treatment must be safeguarded by that nurse. Such information may only be disclosed to other members of the health care team for health care purposes. Confidential information should be shared only with the patient's informed consent, when legally required or where failure to disclose the information could result in significant harm. Beyond these very limited exceptions the nurse's obligation to safeguard such confidential information is universal.

Privacy relates to the patient's expectation and right to be treated with dignity and respect. Effective nurse-patient relationships are built on trust. The patient needs to be confident that their most personal information and their basic dignity will be protected by the nurse. Patients will be hesitant to disclose personal information if they fear it will be disseminated beyond those who have a legitimate "need to know." Any breach of this trust, even inadvertent, damages the particular nurse-patient relationship and the general trustworthiness of the profession of nursing.

Federal law reinforces and further defines privacy through the Health Insurance Portability and Accountability Act (HIPAA). HIPAA regulations are intended to protect patient privacy by defining individually identifiable information and establishing how this information may be used, by whom and under what circumstances. The definition of individually identifiable information includes any information that relates to the past, present or future physical or mental health of an individual, or provides enough information that leads someone to believe the information could be used to identify an individual.

Breaches of patient confidentiality or privacy can be intentional or inadvertent and can occur in a variety of ways. Nurses may breach confidentiality or privacy with information he or she posts via social media. Examples may include comments on social networking sites in which a patient is described with sufficient detail to be identified, referring to patients in a degrading or demeaning manner, or posting video or photos of patients. Additional examples are included at the end of this document.

Possible Consequences

Potential consequences for inappropriate use of social and electronic media by a nurse are varied. The potential consequences will depend, in part, on the particular nature of the nurse's conduct.

BON Implications

Instances of inappropriate use of social and electronic media may be reported to the BON. The laws outlining the basis for disciplinary action by a BON vary between jurisdictions. Depending on the laws of a jurisdiction, a BON may investigate reports of inappropriate disclosures on social media by a nurse on the grounds of: unprofessional conduct; unethical conduct; moral turpitude; mismanagement of patient records; revealing a privileged communication; and breach of confidentiality.

If the allegations are found to be true, the nurse may face disciplinary action by the BON, including a reprimand or sanction, assessment of a monetary fine, or temporary or permanent loss of licensure.

A 2010 survey of BONs conducted by NCSBN indicated an overwhelming majority of responding BONs (33 of the 46 respondents) reported receiving complaints of nurses who have violated patient privacy by posting photos or information about patients on social networking sites. The majority (26 of the 33) of BONs reported taking disciplinary actions based on these complaints. Actions taken by the BONs included censure of the nurse, issuing a letter of concern, placing conditions on the nurse's license or suspension of the nurse's license.

Other Consequences

Improper use of social media by nurses may violate state and federal laws established to protect patient privacy and confidentiality. Such violations may result in both civil and criminal penalties, including fines and possible jail time. A nurse may face personal liability. The

Social Media - continued from previous page

nurse may be individually sued for defamation, invasion of privacy or harassment. Particularly flagrant misconduct on social media websites may also raise liability under state or federal regulations focused on preventing patient abuse or exploitation.

If the nurse's conduct violates the policies of the employer, the nurse may face employment consequences, including termination. Additionally, the actions of the nurse may damage the reputation of the health care organization, or subject the organization to a law suit or regulatory consequences.

Another concern with the misuse of social media is its effect on team-based patient care. Online comments by a nurse regarding co-workers, even if posted from home during nonwork hours, may constitute as lateral violence. Lateral violence is receiving greater attention as more is learned about its impact on patient safety and quality clinical outcomes. Lateral violence includes disruptive behaviors of intimidation and bullying, which may be perpetuated in person or via the Internet, sometimes referred to as "cyber bullying." Such activity is cause for concern for current and future employers and regulators because of the patient-safety ramifications. The line between speech protected by labor laws, the First Amendment and the ability of an employer to impose expectations on employees outside of work is still being determined. Nonetheless, such comments can be detrimental to a cohesive health care delivery team and may result in sanctions against the nurse.

Common Myths and Misunderstandings of Social Media

While instances of intentional or malicious misuse of social media have occurred, in most cases, the inappropriate disclosure or posting is unintentional. A number of factors may contribute to a nurse inadvertently violating patient privacy and confidentiality while using social media. These may include:

- A mistaken belief that the communication or post is private and accessible only to the intended recipient. The nurse may fail to recognize that content once posted or sent can be disseminated to others. In fact, the terms of using a social media site may include an extremely broad waiver of rights to limit use of content.
- The solitary use of the Internet, even while posting to a social media site, can create an illusion of privacy. One such waiver states, "By posting user content to any part of the site, you automatically grant the company an irrevocable, perpetual, nonexclusive transferable, fully paid, worldwide license to use, copy, publicly perform, publicly display, reformat, translate, excerpt (in whole or in part), distribute such user content for any purpose."
- A mistaken belief that content that has been deleted from a site is no longer accessible. ...A mistaken belief that it is harmless if private information about patients is disclosed if the communication is accessed only by the intended recipient. This is still a breach of confidentiality.
- A mistaken belief that it is acceptable to discuss or refer to patients if they are not identified by name, but referred to by a nickname, room number, diagnosis or condition. This too is a breach of confidentiality and demonstrates disrespect for patient privacy.
- Confusion between a patient's right to disclose personal information about himself/herself (or a health care organization's right to disclose otherwise protected information with a patient's consent) and the need for health care providers to refrain from disclosing patient information without a care-related need for the disclosure.
- The ease of posting and commonplace nature of sharing information via social media may appear to blur the line

between one's personal and professional lives. The quick, easy and efficient technology enabling use of social media reduces the amount of time it takes to post content and simultaneously, the time to consider whether the post is appropriate and the ramifications of inappropriate content.

How to Avoid Problems

It is important to recognize that instances of inappropriate use of social media can and do occur, but with awareness and caution, nurses can avoid inadvertently disclosing confidential or private information about patients.

The following guidelines are intended to minimize the risks of using social media:

- First and foremost, nurses must recognize that they have an ethical and legal obligation to maintain patient privacy and confidentiality at all times.
- Nurses are strictly prohibited from transmitting by way of any electronic media any patient-related image. In addition, nurses are restricted from transmitting any information that may be reasonably anticipated to violate patient rights to confidentiality or privacy, or otherwise degrade or embarrass the patient.
- Do not share, post or otherwise disseminate any information, including images, about a patient or information gained in the nurse-patient relationship with anyone unless there is a patient care related need to disclose the information or other legal obligation to do so.
- Do not identify patients by name or post or publish information that may lead to the identification of a patient. Limiting access to postings through privacy settings is not sufficient to ensure privacy.
- Do not refer to patients in a disparaging manner, even if the patient is not identified.
- Do not take photos or videos of patients on personal devices, including cell phones. Follow employer policies for taking photographs or video of patients for treatment or other legitimate purposes using employer-provided devices.
- Maintain professional boundaries in the use of electronic media. Like in-person relationships, the nurse has the obligation to establish, communicate and enforce professional boundaries with patients in the online environment. Use caution when having online social contact with patients or former patients. Online contact with patients or former patients blurs the distinction between a professional and personal relationship. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient. ...Consult employer policies or an appropriate leader within the organization for guidance regarding work related postings.
- Promptly report any identified breach of confidentiality or privacy.
- Be aware of and comply with employer policies regarding use of employer-owned computers, cameras and other electronic devices and use of personal devices in the work place.
- Do not make disparaging remarks about employers or co-workers. Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.
- Do not post content or otherwise speak on behalf of the employer unless authorized to do so and follow all applicable policies of the employer.

NOTICE OF DISCIPLINARY ACTION

The following nurses had disciplinary action taken against their licenses. If you would like to receive additional information regarding the disciplinary action that has been imposed, please send your written request to the Texas Board of Nursing, Enforcement Division, 333 Guadalupe, Suite 3-460, Austin, Texas, 78701-3944.

<u>NAME</u>	<u>LICENSE NUMBER(S)</u>	<u>DISCIPLINE</u>	<u>DATE OF ACTION</u>
ABEL, ROSE MARIE M.	RN 230656	Remedial Education	July 25, 2011
AGBASIMELO, EUCHARIA AMAKA	LVN 187175	Suspend/Probate	July 21, 2011
BANKS-BROCHARD, LISA DIANNIE	RN 671691	Voluntary Surrender	July 25, 2011
BEUVINK, TAMRA LYNN	LVN 193824	Warning with Stipulations, Deferred	July 21, 2011
BOTT, KELLEY LOUISE	RN 714766	Warning with Stipulations	July 21, 2011
BOWERS, TRICIA LYNN	RN 722901	Warning with Stipulations	July 21, 2011
BOYD, RACHEL MARLENE	LVN 197213	License(s) Revoked	July 22, 2011
BRANDON, JUDITH KEZIAH	RN 741849	Remedial Education & Fine	June 16, 2011
BRASH, TRENT C.	RN 579323	Voluntary Surrender	July 21, 2011
BROWN, ROGERLYN ANDREA	RN 682459	Warning with Stipulations, Deferred	July 21, 2011
BURCH, ERIN RAE	RN 763862	Remedial Education, Deferred	July 19, 2011
BURNS, LESA DANIELLE	LVN 177748	Remedial Education, Deferred	June 15, 2011
CAILLOUET, LACHELLE NICOLE	RN 724840	Warning with Stipulations	July 21, 2011
CARRINGTON, APRIL NICOLE	LVN 212543	Warning with Stipulations	July 21, 2011
CHRISTENSEN, SALVACION	LVN 139261	Voluntary Surrender	July 27, 2011
CLARK, TAMMY CHRISTINE	LVN 199401	Remedial Education & Fine	July 13, 2011
CLOSE, COURTNEY LEE	RN 631987	Remedial Education	July 15, 2011
COBB, VERLINDA	RN 246602 & LVN 58161	Remedial Education, Deferred	July 18, 2011
CORKILL, JANICE GAIL	RN 628251	Warning with Stipulations	July 21, 2011
COTTAM, TERESA GAYLE	LVN 154178	Enforced Suspension	July 21, 2011
COVEY, MARK EDWARD	RN 243808	Remedial Education	July 13, 2011
DAVIS, DORIS	RN 655758 & LVN 161306	Warning with Stipulations	July 21, 2011
DAVIS, JUANITA HELENA	LVN 195844	Remedial Education & Fine	July 26, 2011
DAVIS, VICKIE MARIE	LVN 149427	Warning with Stipulations	July 21, 2011
DAY, GREGORY JAMES	LVN 193261	Remedial Education & Fine	July 5, 2011
DAY, KRISTI MICHELLE	LVN 154852	Voluntary Surrender	July 15, 2011
DEAN, DAVID HAROLD	RN 709195	Voluntary Surrender	July 19, 2011
DECUIR, CHELSEY KAYE	LVN 211961	Warning with Stipulations	July 21, 2011
DEHART, AIMEE	RN 648203	Remedial Education	July 29, 2011
DELCE, TAWANA	RN 657539	Voluntary Surrender	July 13, 2011
DORMAN, CATHERINE	RN 760944	Warning with Stipulations	July 21, 2011
DUECK, PAUL RAYMOND	RN 587481	Warning with Stipulations	July 21, 2011
DUGGAN, TIMOTHY NEAL	RN 666028	Remedial Education, Deferred	July 7, 2011
EARLES, SANDRA NOEL	RN 631786	Remedial Education, Deferred	July 13, 2011
ELDRIDGE, IRIS LOU	RN 237535 & LVN 58323	Remedial Education, Deferred	July 19, 2011
ELLIOTT, JERUSA LEA	RN 737011	Warning with Stipulations	July 21, 2011
ELLIS, MARY LEE	LVN 112176	Voluntary Surrender	June 23, 2011
ELLISOR, EVELYN LOUISE	RN 251160 & LVN 46478	Reprimand with Stipulations	July 21, 2011
FORCUM, ELLEN MARGARET	RN 678866	Voluntary Surrender	July 18, 2011
FREEMAN, BRENDA SUE	LVN 145073	Voluntary Surrender	July 15, 2011
FRUGIA, CHRISTY NICHOLS	RN 640928 & LVN 150100	Voluntary Surrender	June 15, 2011
GATES, LORETTA SHERILLA	LVN 76470	Warning with Stipulations	July 21, 2011
GENTRY, AMY LYNN	RN 659429	Voluntary Surrender	July 6, 2011
GONZALES, LETICIA RAQUEL	RN 657626	Remedial Education, Deferred	July 6, 2011
GONZALEZ, ROSA A.	RN 516829	Warning with Stipulations	July 21, 2011
GOSSETT, SHAWNA MARIE	LVN 190370	Remedial Education & Fine	July 1, 2011
GRAY, MARGARET LINDA	LVN 123912	Warning with Stipulations	July 21, 2011
HARRIS, HEATHER ANNE	RN 569608	Warning with Stipulations, Deferred	July 21, 2011
HARRISON, SARAH LEE	LVN 141626	Remedial Education	June 28, 2011
HARTLEY, HARRIET MAE	RN 572506	Enforced Suspension	July 21, 2011
HARVEY, SUSIE ANGELINA	RN 662691	Warning with Stipulations	July 21, 2011
HAWKINS, WANDA CATHERINE	RN 616835 & LVN 143172	License(s) Revoked	July 22, 2011

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DISCIPLINARY ACTION

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<u>NAME</u>	<u>LICENSE NUMBER(S)</u>	<u>DISCIPLINE</u>	<u>DATE OF ACTION</u>
HECKER, MICHAEL T.	RN 619074 & LVN 147747	Enforced Suspension	July 21, 2011
HILL, ALISSA MARIE	RN 572216	Warning with Stipulations	July 21, 2011
JAGOW, RHONDA KAY	RN 628919 & LVN 134235	Warning with Stipulations	July 21, 2011
JOHNSON, ELIZABETH KAY	LVN 135372	Voluntary Surrender	July 20, 2011
JOHNSON, JOY B.	RN 517176	Remedial Education & Fine	July 27, 2011
JONES, MICHELLE ANN	RN 761743	Warning with Stipulations	July 21, 2011
JORDAN, CYNTHIA KAYE	RN 237984	Warning with Stipulations	July 21, 2011
JORDAN, FELICIA LASHAWN	RN 730201 & LVN 175827	Enforced Suspension	July 21, 2011
KINNEY, ROBERT LYNN	RN 223801	Remedial Education	July 20, 2011
KIRUBI, JAYNE WANJIRU	LVN 182743	Remedial Education & Fine	June 29, 2011
KRAFT, WALTER GEORGE	RN 784878	Voluntary Surrender	July 13, 2011
LEESON, SALLY JO	RN 540796 & LVN 104701	Voluntary Surrender	June 17, 2011
LENGINGTON, FRANCESCA	RN 648609	Voluntary Surrender	July 19, 2011
LORENZ, REGINA C.	RN 641622	Warning with Stipulations	July 21, 2011
LUM, REGINA FLETCHER	RN 645284	Remedial Education & Fine	June 27, 2011
MACCRACKEN, LUCIA COLOMBANO	RN 610850	Remedial Education with Fine, Deferred	July 12, 2011
MACMULLAN, ELLEN LORRAINE	LVN 144555	Voluntary Surrender	July 26, 2011
MARTINEZ, ANTHONY	RN 652063	Voluntary Surrender	June 23, 2011
MARTINEZ, RICHARD CHARLES	RN 709123	Suspend/Probate	July 21, 2011
MAYES, KELLY	RN 643395	Suspend/Probate	July 21, 2011
MCBRIDE, ROSEMARY JEAN	RN 442665	Voluntary Surrender	July 18, 2011
MCDADE, JANET ANNE	LVN 154036	Warning with Stipulations	July 21, 2011
MCELREA, MARK EUGENE	RN 775107	Suspend/Probate	July 21, 2011
MCGILL, JACQUELINE DENISE	RN 697028	Voluntary Surrender	June 23, 2011
MEDLIN, CYNTHIA SUE	RN 605520	Remedial Education & Fine	June 27, 2011
MEJORADO, SALVADOR MARTINEZ	RN 592471	Remedial Education & Fine	June 17, 2011
METCALF, GINGER D.	RN 509618	Warning with Stipulations, Deferred	July 21, 2011
METTS, MELVIN ALEXANDER	LVN 132309	Voluntary Surrender	June 30, 2011
MILLER, LESLIE MICHELLE	LVN 166734	Warning with Stipulations	July 21, 2011
MITCHELL, EVELYN KAY	RN 534651	Suspend/Probate	July 21, 2011
MOFFITT, BRANDON LANCE	RN 613750 & LVN 145386	Voluntary Surrender	July 29, 2011
MOORE, QUINCY BERNARD	LVN 209568	Warning with Stipulations	July 21, 2011
MORGENROTH, CARRIE CORRINE	LVN 153627	Remedial Education & Fine	June 17, 2011
MORRIS, LINDA	RN 590600	Voluntary Surrender	June 29, 2011
MOSER, SHARLA RAE	RN 584692	Limited License	July 21, 2011
MOSS, HOLLY INEZ	RN 519253	Voluntary Surrender	July 18, 2011
MOYA, CATHRINE DARLEEN	LVN 154527	Remedial Education & Fine	July 14, 2011
NAVA, VALERIE KAYE	LVN 177793	Enforced Suspension	July 22, 2011
NEW, CATHY SUSAN	LVN 160190	Remedial Education & Fine	July 1, 2011
NUNEZ, SANDRA	LVN 154063	Remedial Education & Fine	June 17, 2011
OGIDI, BLESSING DORNUBARI	RN 676073	Remedial Education	July 11, 2011
OGUNLANA, MONSURAT ADETORO	RN 583831	Voluntary Surrender	June 23, 2011
PARKER, MICHELLE ANGOLIA	LVN 201328	Warning with Stipulations	July 21, 2011
PERDUE, KAREN ROSEANNE	LVN 128157	Suspend/Probate	July 21, 2011
PETERSON, PATSY JEAN	RN 555388 & LVN 74768	Warning with Stipulations	July 21, 2011
PETERSON, SARAH ALLEVA	RN 714232 & LVN 188180	Voluntary Surrender	June 27, 2011
PHAM, NGOC-HANH NGUYEN	RN 719216	Remedial Education, Deferred	July 6, 2011
POORE, CLIFTON RICHARD	RN 721160	Suspend/Probate	July 21, 2011
PRADO, INDIRA	RN 626586	Remedial Education & Fine	June 28, 2011
PRASIL, KITTRIN LAPPIN	RN 423017	Remedial Education & Fine	July 11, 2011
PRICE, SUSAN	RN 642685	Reprimand with Stipulations	July 21, 2011
RAINES, PHILLIP	RN 628161	Voluntary Surrender	July 15, 2011
RAMIREZ, ADAM LAEL	RN 660326	Suspend/Probate	July 21, 2011
REYNA, TANYA MARIE	LVN 196502	Remedial Education & Fine	July 14, 2011
RICHARDS, BEVERLY	RN 753845	License(s) Revoked	July 22, 2011
RIDDLE, LISA GAIL	RN 798097 & LVN 206368	Warning with Stipulations	July 21, 2011
RIDER, PATRICIA C.	LVN 90378	License(s) Revoked	July 21, 2011
RINEHART, FLORENCE SUZETTE	LVN 141178	Voluntary Surrender	July 15, 2011
ROMOLTON II, JOHN RICHARD	RN 622628	Remedial Education & Fine	June 27, 2011

DISCIPLINARY ACTION

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<u>NAME</u>	<u>LICENSE NUMBER(S)</u>	<u>DISCIPLINE</u>	<u>DATE OF ACTION</u>
RUGGIERO, SHAWN DENISE	RN 735866	License(s) Revoked	July 22, 2011
RUSHING, GINA MARIE	LVN 201616	Remedial Education & Fine	July 28, 2011
SACHETTA, ANGELA	LVN 107346	Reprimand with Stipulations	July 21, 2011
SANCHEZ, ANNE FISHER	RN 631160	Reprimand with Stipulations	July 21, 2011
SANTOS, CHONTELL RENE	LVN 221507	Enforced Suspension	July 21, 2011
SEMICH, MARY JANE	RN 688166	Voluntary Surrender	July 12, 2011
SHEGDA, DAVID	RN 752203	Voluntary Surrender	July 5, 2011
SIMMONS, WILLIAM PATRICK	LVN 171808	Enforced Suspension	July 21, 2011
SKAGGS, TIMOTHY L.	RN 534735	Remedial Education & Fine	June 15, 2011
SKOWRON, SUZY MICHELLE	LVN 171635	Remedial Education & Fine	June 27, 2011
SMITH, PATRICIA ANN	LVN 119723	Voluntary Surrender	June 23, 2011
SOSA, RICHARD	RN 667426 & LVN 175500	Warning with Stipulations	July 21, 2011
STEWART, TONI DENEVA	LVN 75086	Voluntary Surrender	June 17, 2011
STRETCH, MYRNA LEE	RN 724082	Voluntary Surrender	July 1, 2011
TAYLOR, SHIRLEY ROSE	RN 634934	Warning	July 21, 2011
THOMAS, MEGAN LASHELL	LVN 217345	Reprimand with Stipulations	July 21, 2011
THOMAS, VALSAMMA	LVN 143174	Remedial Education, Deferred	July 26, 2011
THOMPSON, FRED D.	RN 513126 & LVN 100535	Reprimand with Stipulations	July 22, 2011
TISDALE, SARAH JADE	RN 755132	License(s) Revoked	July 22, 2011
TORRES, REYNALDO CAWA	RN 668564 & LVN 171466	Remedial Education with Fine, Deferred	July 19, 2011
TRAMMELL, DEBBIE ANN	LVN 108980	Voluntary Surrender	June 22, 2011
TREVINO, DEBBE PURCELL	LVN 133934	Limited License	July 21, 2011
TURNER, JOHN	RN 631036	Voluntary Surrender	June 20, 2011
TURNER, VALNITA RENA	RN 548694	Reprimand with Stipulations	July 21, 2011
UBANI, EZINNE UGONWAYI	RN 601746 & LVN 143194	Voluntary Surrender	July 1, 2011
VINCENT, ALISA WINGERTER	RN 726660	Remedial Education & Fine	June 23, 2011
WALLACE, MARY ANN	LVN 195384	Remedial Education & Fine	July 14, 2011
WALSH, CHRISTINE MARIE	RN 591710	Warning with Stipulations, Deferred	July 21, 2011
WELLS, MICHAEL SCOTT	RN 682498 & LVN 162894	Remedial Education & Fine	July 19, 2011
WHITE, JARED EVAN	RN 708353	Warning with Stipulations	July 21, 2011
WHITTINGTON, AMY LYNN	RN 639992	Warning with Stipulations, Deferred	July 21, 2011
WILLIS, KRISTY NICHOLE	LVN 228001	Warning with Stipulations	July 15, 2011
WILLIS, MELODY TIDWELL	RN 766903 & LVN 187174	Remedial Education & Fine	July 13, 2011
WYNN, DEBORAH	RN 643455	Voluntary Surrender	June 17, 2011
ZRODLOWSKI, JOHN EDWARD	RN 708979	Voluntary Surrender	June 23, 2011
ZUNIGA, REYMIE M.	RN 612082 & LVN 122932	Warning with Stipulations	July 21, 2011

Board of Nursing Contact Information

MAIN NUMBER.....(512) 305-7400
 FAX.....(512) 305-7401
 -- 24-hour Access
 -- License Verification
 -- General Information

ENFORCEMENT.....(512) 305-6838
 -- Complaint and Disciplinary Action Inquiries
 -- Violations of NPA and Rules and Regulations
 -- Monitoring of Disciplined RNs and LVNs

OPERATIONS

CUSTOMER SERVICE.....(512) 305-6809
 -- License Renewals
 -- Endorsement/Examination
 -- Continuing Education for LVNs & RNs

SALES OF LISTS.....(512) 305-6848
 -- Electronic Nurse Files
 -- Publications

NEWSLETTER INFO.....(512) 305-6842

WEB Address.....www.bon.texas.gov
 -- Refer e-mail inquiries to:
 webmaster@bon.texas.gov

PROFESSIONAL AND VOCATIONAL NURSING

ADVANCED PRACTICE.....(512) 305-6843
 -- APRN Application and
 Prescriptive Authority Procedures

NURSING PRACTICE.....(512) 305-6802
 -- Nursing Practice Issues
 -- Legislation

Workshop Information.....(512) 305-6844
 -- Workshop e-mail inquiries:
 workshops@bon.texas.gov

NURSING EDUCATION.....(512) 305-6816

Texas Board of Nursing Continuing Nursing Education Offerings

Nursing Jurisprudence and Ethics Workshop

“Protecting Your Patients and Your Practice”



The Texas Board of Nursing (BON) will be presenting nursing jurisprudence and ethics workshops in 2012. Specific dates and locations for 2012 workshops will be announced after facility arrangements are secured. Workshop brochures with registration forms will be posted on the BON website at www.bon.texas.gov under *“BON Meetings and Events”* at a later date. The completed Workshop awards 7.0 contact hours.

Webinar

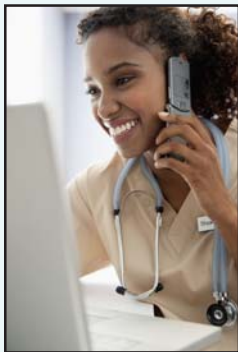
*“Nursing Peer Review: Understanding the Process”
and “Safe Harbor: Ensuring Patient Safety”*

In addition to the identified webinars, Board staff are currently developing additional webinars to be presented during 2012. For a list of webinar topics, including dates and times, check the Board website frequently for updated information.

Online CNE Offering

www.bon.texas.gov

“Nursing Regulations for Safe Practice”



Nurses can remain current regarding laws surrounding nursing practice from the leisure of their own homes and on their own schedules. The online learning module is designed to promote patient safety in an engaging and interactive way by offering participants updated information regarding current laws and rules that impact nursing practice. The cost of the online CNE offering is \$25.00. The completed activity awards 2.0 contact hours.

These continuing education activities were approved by the Texas Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

Did you know....

The Board of Nursing Customer Service Department offers *Live Chat* assistance via the BON Web Site available Monday through Friday from 8:00 a.m. to 5:00 p.m. for nurses who have questions about obtaining or renewing a nursing license. The online chat link is located in the *FAQs - Licensing* section: www.bon.texas.gov/faqs-licensing.html

*Help stem the stigma surrounding nurses with
Substance Abuse and Mental Illness*

Volunteer for a Peer

The next advocacy training and employer recognition meeting will take place on April 13-14, 2012, in Austin, Texas.

For more information visit

www.tpapn.org

or call

1 (800) 288-5528

TPAPN is a program of the Texas Nurses Foundation



The purpose of the *Texas Board of Nursing Bulletin* is to disseminate information to nurses licensed by the State of Texas, their employers, health care providers, and the public concerning laws and regulations established by the Texas Board of Nursing related to the safe and legal practice of nursing. The *Texas Board of Nursing Bulletin* provides information on current issues and trends in nursing regulation, status of nursing education programs, information regarding licensure and nursing practice, and disciplinary action taken against licensees who violated the Nursing Practice Act.

Texas Board of Nursing
333 Guadalupe, Suite 3-460
Austin, Texas 78701-3944



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2. Last four digits of Social Security Number;
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