



Arkansas Department of Health

Arkansas State Board of Nursing
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Governor Asa Hutchinson
José R. Romero, MD, Secretary of Health
Sue A. Tedford, MNSc, APRN, Director

BOARD MEETING MINUTES

TIME AND PLACE:	November 17, 2021 Board Conference Room
MEMBERS PRESENT:	Lance Lindow, RN; Neldia Dycus, BS, MHSM, MHRD, RN; Janice Ivers, MSN, RN, CNE; Stacie Hipp, MSN, APRN; Michael Burdine, RN; Jasper Fultz, LPN; Melanie Garner, LPN, CLC; Yolanda Green, LPN; Ramonda Housh, MNSc, APRN, CNP, C-PNP
MEMBERS ABSENT:	Rachel Sims, BSN, RN
STAFF ATTENDING AT VARIOUS TIMES:	Sue A. Tedford, Director, MNSc, APRN David Dawson, JD, General Counsel Ashley Fisher, Attorney Specialist Tonya Gierke, Assistant Director, MNSc, RN, CNE Lisa Wooten, Assistant Director, MPH, BSN, RN Karen McCumpsey, Assistant Director, MNSc, RN, CNE Shannon McKinney, Assistant Director, DNP, APRN, WHNP-BC Tammy Vaughn, Program Coordinator, MSN, RN, CNE Aaron Singleton, Regulatory Board Chief Investigator Leslie Suggs, Executive Assistant to the Director Susan Moore, Computer Operator Albert Williams, Information Systems Coordinator Mindy Darner, Legal Support Specialist Corrie Edge, Administrative Analyst Lisa Mendenhall, Legal Support Specialist Mary Kennebrew, Office of Attorney General

President Lance Lindow called the meeting to order at 8:30 a.m. Guests were welcomed and a flexible agenda was approved.

DISCIPLINARY HEARINGS

General Counsel, David Dawson and Ashley Fisher, Attorney Specialist, represented the Board. Motions reflect the decisions of the Board reached in deliberation following the hearing of each case.

MARGARET LASHUN HENDERSON-LEE, CNP LICENSE NO 215143

Respondent was present for the proceedings before the Board and was represented by counsel, Darren O'Quinn. Shannon McKinney, DNP, APRN, WHNP-BC, RNC-OB, provided testimony on behalf of the Board. Respondent has been charged with A.C.A. §17-87-309(a)(1) and pleads not guilty to the charges. On April 7, 2021, the Board issued a Letter of Reprimand to Respondent for violations of the Arkansas Nurse Practice Act, A.C.A. §17-87-309(a)(1). On or about August 5, 2015, the Tennessee Board of Nursing issued a reprimand on Respondent's Tennessee RN license R106888. On or about November 25, 2020, Respondent submitted an APRN endorsement application to the Board with "no" marked as the answer for the question "Have you ever had any disciplinary action on a nursing license or a privilege to practice in any state, jurisdiction, country, or province?" The Letter of Reprimand was sent by certified

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mail to Respondent's last known address on file with the Board. On April 22, 2021, ASBN staff received a letter from Respondent's counsel requesting a hearing to appeal the Letter of Reprimand issued on April 7, 2021.

MOTION: I MOVE that based on the evidence presented and the allegations contained in the Order and Notice of Hearing, the Arkansas State Board of Nursing finds that **MARGARET LASHUN HENDERSON-LEE, CNP LICENSE NO 215143**, Letter of reprimand dated April 7, 2021, be rescinded and a Letter of Warning be issued.

Brought by Mike Burdine and seconded by Melanie Garner.

PASSED

JAMES DUSTIN BAILEY, RN LICENSE NO R101366

Respondent was present for the proceedings before the Board and was represented by counsel, Darren O'Quinn. Shannon McKinney, DNP, APRN, WHNP-BC, RNC-OB, provided testimony on behalf of the Board. Respondent has been charged with A.C.A. §17-87-309(a)(6), and pleads not guilty to the charges. On April 14, 2021, the Board issued a Letter of Reprimand to Respondent for violations of the *Arkansas Nurse Practice Act*, A.C.A. §17-87-309(a)(6). Howard Memorial Hospital, Nashville, Arkansas employed Respondent on or about May 30, 2017, and involuntarily terminated Respondent on July 4, 2019, for false documentation and quality of care issues. On May 21, 2018, Respondent received a written warning for violation of company policies. Respondent was reported for sleeping on the job and smoking an electronic cigarette at work in an empty patient room. On May 9, 2019, Respondent received a written warning for violation of company policies and substandard work. Respondent was cited for failure to follow physician's orders and inappropriate nursing management of a post-op patient. The patient was ordered routine recovery vital signs, which are every four (4) hours unless otherwise ordered. Respondent did not obtain vital signs until ten (10) hours after admission to the PCU. On July 4, 2019, Respondent was terminated for violation of company policies, substandard work, and violation of safety rules. Respondent inserted a Foley catheter in a male patient at approximately 0047. The locator report shows Respondent did not round on the patient from 0055 to 0405. The last round was performed at 0510. The oncoming nurse found the patient in a large puddle of blood down to his knees. The blood was noted to be coming around the insertion site of the catheter. The patient reported he had complained of bleeding and pain. On July 4, 2019, Respondent was also assigned to provide care to the patients in rooms 113, 117, and 120. The nurse locator and camera report showed: Room 113 – Locator report: From 2200-0400 no one in the room. Documentation of vitals and two (2), hour rounding in chart. Camera report shows Respondent rounded through rooms without a vital sign machine or stethoscope. The patient was NPO, and the rounding Hospitalist reported Respondent had given the patient sips of water. Respondent admitted giving sips of water because he "wanted to see if the patient would tolerate liquids." Room 117 – Locator report: no rounds from 0057 to 0400. Vitals and two (2), hour rounding documented. Camera report shows Respondent rounded through rooms without a vital sign machine or stethoscope. Room 120 - Locator report: no rounds from 1137-0238. Vital sign machine in room with patient due to isolation precautions. Two (2) hour round and vitals noted on chart. The Letter of Reprimand was sent by certified mail to Respondent's last known address on file with the Board and his current attorney. The certified mail was signed for by Respondent on April 17, 2021, and his attorney on April 23, 2021. On May 11, 2021, Board staff received notification that Respondent was represented by a new attorney and a hearing was requested to appeal the Letter of Reprimand issued on April 14, 2021.

MOTION: I MOVE that based on the evidence presented and the allegations contained in the Order and Notice of Hearing, the Arkansas State Board of Nursing finds that **JAMES DUSTIN BAILEY, RN LICENSE NO R101366**, the Letter of Reprimand issued April 14, 2021, be upheld.

Brought by Janice Ivers and seconded by Yolanda Green.

PASSED

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Ashley Fisher, the Board's attorney, presented consent agreements that had been entered into since the last meeting. Following discussion of each individual agreement, the following motion was passed:

MOTION: I MOVE that the Arkansas State Board of Nursing ratify the following Consent Agreements:

Duncan, Loretta Naomi Hendrix R105970, L056988 (Evening Shade, AR)

Violation – *The Nurse Practice Act of Arkansas ACA §17-87-309 (a)(4), (a)(6)*
Probation – 3 years
Courses – Substance Abuse Bundle, The Nurse and Professional Behaviors, Documentation for Nurses
Civil Penalty - \$750.00

Freeman, Patricia Marie R072460, (Greenbrier, AR)

Violation – *The Nurse Practice Act of Arkansas ACA §17-87-309 (a)(2)*
Probation – 3 years
Courses – Substance Abuse Bundle, The Nurse and Professional Behaviors

Brought by Stacie Hipp and seconded by Janice Ivers

PASSED

Sue Tedford spoke to the Board about encumbrance and the definition of encumbrance and how it changed with the enactment of the enhanced Nurse Licensure Compact.

Tammy Vaughn presented to the Board a motion to grant approval to the Northwest Technical Institute Medication Assistant- Certified program to begin in March of 2022.

MOTION: I MOVE that the Arkansas State Board of Nursing grant approval to the Northwest Technical Institute Medication Assistant-Certified program, to begin in March 2022.

Brought by Ramonda Housh and seconded by Janice Ivers.

PASSED

The meeting recessed for lunch at 12:04 p.m. Following lunch, the Board resumed hearings.

President Lance Lindow called the meeting to order at 1:03 p.m. A flexible agenda was approved.

The Board heard from an Arkansas Alternative to Discipline Program (ArNAP) participant that is going through the Program. The participant shared their experience with the program and answered questions from the Board.

LINDSEY MICHELLE LEGGETT BROYLES TAYLOR LEGGETT, LICENSE NO. R105077, L050507 (EXPIRED)

Respondent was present for the proceedings before the Board and was not represented by counsel, Nick Shull, Arkansas Department of Health, Pharmacy Services, and Lisa Wooten, MPH, BSN, RN, provided testimony on behalf of the Board. Respondent has been charged with Ark. Code Ann. § 17-87-309(a)(4) and (a)(6) and pleads not guilty to the charges. Respondent holds Arkansas License Nos. R105077 and L050507. An investigation was initiated after the Board received a complaint from Pain Treatment Centers of America (PTCOA) in White Hall, Arkansas, submitted on November 16, 2020. The complaint indicated, in part, that Respondent tested positive for significant amounts of morphine on August 20, 2020, and September 24, 2020. Respondent's employment history indicates that she was hired by Hospice Home Care in Little Rock, Arkansas in April of 2020. Respondent is employed in good standing. Respondent's medical record from Pain Treatment Centers of America indicates that Respondent was being treated for complaints of hand pain, arm pain, foot pain and hip pain. The prescription field indicates the issuance of prescriptions, including sixty (60) tablets of hydrocodone/APAP 10/325mg with

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instructions to take one-half (1/2) to one (1) tablet twice daily as needed; ninety (90) tablets of tramadol 50mg with instructions to take one (1) tablet every eight (8) hours as needed; and thirty (30) capsules of Lyrica (pregabalin) 75mg with instructions to take one (1) capsule at bedtime. A urine drug screen report dated August 20, 2020, indicated that Respondent tested positive for substances including, but not limited, to morphine at 10,600 ng/ml and marijuana/Marinol at 24 ng/ml. A urine drug screen report dated September 24, 2020, indicated that Respondent tested positive for substances including, but not limited, to morphine at 667 ng/ml. The Pain Treatment Center withdrew further pain treatment care due to Respondent's "failure to comply with your pain management contract...there were two (2) urine drug screens that were positive for morphine and was a no show twice and rescheduled twice which is against pain contract with PTCOA." Pharmacy printouts indicate Respondent was dispensed the following prescriptions as issued by eight (8) different providers: twenty-seven (27) prescriptions for alprazolam, which totaled two thousand one hundred- thirty (2,130) tablets, last filled on November 17, 2020, two (2) prescriptions for carisoprodol, which totaled thirty-five (35) tablets, last filled on May 13, 2019, twenty-four (24) prescriptions for hydrocodone/APAP, which totaled six hundred sixty-five (665) tablets, last filled on October 23, 2020, one (1) prescription for hydrocodone/chlorpheniramine suspension, which totaled one hundred -fifteen (115) milliliters, filled on April 16, 2019, six (6) prescriptions for Lyrica (pregabalin), which totaled one hundred-fifty (150) capsules, last filled on November 12, 2020, one (1) prescription for oxycodone/APAP, which totaled fifteen (15) tablets, filled on March 9, 2020, five (5) prescriptions for phentermine, which totaled one hundred- fifty (150) tablets, last filled on November 3, 2020, one (1) prescription for promethazine/codeine syrup, which totaled one hundred- twenty (120) milliliters, filled on December 27, 2019, and eighteen (18) prescriptions for tramadol, which totaled one thousand five hundred- twenty (1,520) tablets, last filled on November 12, 2020. On July 27, 2021, Board staff sent a letter via ASBN Nurse Portal and by certified mail to Respondent's last known mailing address on file with the Board requesting an addiction evaluation. Respondent scheduled an evaluation with Bradley Diner, MD. PLC, on July 23, 2021. Dr. Diner submitted a report wherein he recommends, in part, that Respondent can continue to practice nursing safely. However, she should have close monitoring for at least the next twelve (12) to twenty-four (24) months. Her monitoring should include random urine drug screens as well as intermittent hair follicle tests. If her pain management is going to be assumed by her primary care physician, he should also institute a pain management contract that Respondent should follow religiously. Any deviation or noncompliance with that contract should be met with immediate license suspension and consideration of further treatment. Dr. Diner also recommends that Respondent should continue under the care of a psychiatrist and that her various medical providers coordinate care with her primary care physician. Respondent was offered a consent agreement. Respondent declined the offered consent agreement and requested a hearing before the Board.

MOTION: I MOVE that based on the evidence presented and the allegations contained in the Order and Notice of Hearing, the Arkansas State Board of Nursing finds that **LINDSEY MICHELLE LEGGETT BROYLES TAYLOR LEGGETT, LICENSE NO. R105077, L050507 (EXPIRED)**, has been charged with a violation of Ark. Code Ann. § 17-87-309(a)(4) and (a)(6) and that Respondent's license and privilege to practice as a nurse be placed on probation for three (3) years with the following terms and conditions:

- Pursuant to A.C.A. §17-87-104(b)(1), Respondent shall pay a civil penalty of \$2,688.00, plus any outstanding balance associated with previous disciplinary action. Such fine shall be payable within fifteen (15) days of receipt of this Order. If unable to pay the civil penalty within fifteen (15) days, a payment schedule shall be submitted within fifteen (15) days to the Board via email at ASBN.monitoring@arkansas.gov.
- Respondent shall provide evidence within six months of successful completion of the Board approved course: *Substance Abuse Bundle*. Respondent shall submit the certificate of completion via the Board approved monitoring program.
- Respondent shall attend AA/NA, or other Board approved support group meetings and shall submit quarterly reports to the Board through the Board approved monitoring program. Acceptable evidence shall consist of completion of the disciplinary form, Aftercare Meetings

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Report. Respondent shall log attendance of all support group meetings via the Board approved monitoring program. Respondent shall attend at least three (3) AA/NA or other Board approved support group meeting(s) a week during the period of suspension and / or probation.

- Respondent shall obtain or continue counseling with a psychiatrist, psychologist, or other recognized mental health practitioner and shall submit the practitioner's progress report quarterly until discharged by the practitioner. Treatment shall begin within thirty (30) days of receipt of this Order.
- Respondent shall abstain at all times from the use of all controlled or abuse potential substances including alcohol, products that contain alcohol, all fermented products (i.e. kefir, kombucha tea, etc.), hemp, poppy seeds, cannabidiol (CBD), or any product or by-product containing the same. Short-term treatment (less than three (3) weeks) with a controlled medication may be allowed for an acute illness or acute condition with appropriate documentation (i.e. short-term waiver, medical record documentation, etc.). Respondent shall notify Board staff within ten (10) days of being prescribed a controlled or abuse potential substance via the Board approved monitoring program. Respondent shall log all medications, including over-the-counter medications via the Board approved monitoring program. Acceptable documentation must include the following information: prescriber, medication name, dose, date prescribed, and amount dispensed. Acceptable format of documentation includes photo(s) of the prescription label, documentation from the provider, or documentation from the pharmacy.
- Respondent shall submit to observed, random drug screens. The observed drug screens shall meet the criteria established by the Board and be conducted through a Board approved monitoring program, laboratory, and collection site. Respondent shall contact the monitoring program to activate their account and begin checking in daily beginning the first of the month following the Board Order. If selected for testing, Respondent shall submit the specimen within two (2) hours from the time of notification. Respondent shall not submit specimens at Respondent's place of employment or practice site. Failed drug screens include the results of a biological specimen, which is determined to be diluted, substituted, abnormal, adulterated, or tests positive for alcohol, controlled substances, abuse potential substances, or their metabolites without a valid prescription or failure to present and provide specimen when notified. Respondent shall notify the Board of any travel two (2) weeks prior to traveling by submitting a monitoring interruption via the Board approved monitoring program. Respondent shall continue to check in during travel period and test when selected. Travel outside the continental U.S. requires 30 days' notice. If approved, a waiver shall be issued during the travel period outside the continental U.S.
- Respondent shall submit the *Enforcement Personal Report* to the Board via the Board approved monitoring program quarterly.
- Respondent shall notify and present to each employer a copy this Order if working as a nurse on probation. Respondent shall have employer sign the *Employer Acknowledgement* form. Respondent shall submit the document to the Board via the Board approved monitoring program. Respondent shall have their employer complete the *Performance Evaluation Report* and Respondent shall submit the report to the Board via the Board approved monitoring program quarterly.
- Respondent shall ensure that all reports of Respondent and the employer are submitted quarterly via the Board approved monitoring program.
- Respondent shall work under supervision in any setting. Supervision requires another nurse at the same or higher education level, to be working in the same setting as Respondent and be readily available to provide assistance and intervention. Respondent shall not be employed in critical care, in-home hospice, or home health settings.
- Respondent shall not collect any drug screen specimen from a participant who has been ordered to drug screen by the Board of Nursing.
- The Nurse Licensure Compact status of Respondent's Arkansas license shall be single state, allowing practice only in the State of Arkansas. Respondent may submit the *Multistate*

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Conversion Application after successful completion of probation to determine if license meets the Uniform Licensure Requirements (ULR) for multi-state compact status.

- Respondent shall execute any release necessary to give the Board access to records including, but not limited to, medical, psychological, employment, and or criminal records. Failure to execute a release shall be grounds for additional disciplinary action against Respondent's license / privilege to practice.
- Respondent shall obey all federal, state and local laws and all rules governing the practice of nursing in this state.
- Respondent shall be responsible for all costs involved in complying with the Board's Order.
- Respondent is required to submit any change of information, even a temporary one, in name, address, or employer via the ASBN Nurse Portal within ten (10) days of the change.
- Respondent shall request to the Board verification of termination of the probationary period and license reinstatement via the ASBN Nurse Portal or via the Board approved monitoring program once compliance with the Board's Order is met. Respondent is required to continue all monitoring requirements including, but not limited to, checking in daily for random drug screening, testing if selected, attending meetings, and submitting reports until released from the probation period by Board staff.
- Pursuant to Ark. Code Ann. §17-87-309, failure to comply with this Order may result in additional disciplinary action on the Respondent's licensure and/or privilege including, but not limited to, additional probation, suspension, or revocation of licensure and/or privilege to practice nursing in this state.

Janice Ivers has recused herself from this case.

Brought by Mike Burdine and seconded by Neldia Dycus.

PASSED

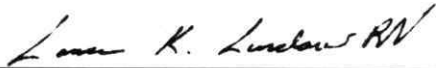
Sue Tedford presented the proposed rules related to Act 412 of 2021. After review the following motion was presented:

MOTION: I MOVE that the Arkansas State Board of Nursing accept the rules submitted by the Full Independent Practice Credentialing Committee presented on November 17, 2021.

Brought by Lance Lindow and seconded by Stacie Hipp.

PASSED

There being no further business, the meeting adjourned at 3:43 pm.



Lance Lindow, President



Mindy Darner, Recording Secretary



Date Approved