

REPORT OF THE EXECUTIVE DIRECTOR

NATIONAL ISSUES

JCAHO Approves List of Patient Safety Goals: The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) has approved its list of 2007 National Patient Safety Goals (NPSG). The development and annual updating of the NPSGs and requirements is overseen by a panel of widely recognized patient safety experts, as well as nurses, physicians, pharmacists, risk managers, and other professionals who have hands-on experience in addressing patient safety issues in a wide variety of health care settings. The 2007 NPSG's are as follows: Improve the accuracy of patient identification; Improve the effectiveness of communication among caregivers; Improve the safety of using medications; Reduce the risk of health care-associated infections; Accurately and completely reconcile medications across the continuum of care; Reduce the risk of patient harm resulting from falls; Reduce the risk of influenza and pneumococcal disease in institutionalized older adults; Reduce the risk of surgical fires; Implementation of applicable National Patient Safety Goals and associated requirements by components and practitioner sites; Encourage patients' active involvement in their own care as a patient safety strategy; and Prevent health care-associated pressure ulcers (decubitus ulcers). The organization identifies safety risks inherent in its patient population.

WHA Opposes Criminal Charges for Medical Error: The Wisconsin Hospital Association (WHA) has issued a statement opposing the criminalization of medical errors after the state filed criminal charges against a nurse who mistakenly administered an epidural intravenously, resulting in a patient's death. Several federal and state agencies have investigated the incident and corrections have been made at the hospital to improve the safety and quality of care. In the statement, the WHA says that the prosecution is sending the wrong message to practitioners in the state, and those who are considering practicing in the state. The Institute for Safe Medicine Practices (ISMP) has backed the WHA statement. For more information, see http://www.wha.org/pubArchive/valued_voice/vv11-3-06.htm#1

Nursing Shortage: Recently, the New York Daily News examined the U.S. job market for registered nurses, where demand is "outpacing supply, with over a million U.S. vacancies expected by 2012." The U.S. Bureau of Labor Statistics estimates that as a result of demand for registered nurses, nursing will be the fastest growing industry nationwide for the next five years. The need is expected to persist as more nurses begin to retire. According to the American Nurses Association, the average U.S. nurse is nearly 50 years old and is close to retirement. Few young workers are entering the nursing profession to fill their places. In addition, nursing schools often are unable to accommodate new students because of faculty shortages. Nursing teachers are required to hold a master's degree, but less than half of nurses pursue graduate education, according to a New York State Board of Nursing survey.

Advanced Practice Nurses Data: According to the ANA, there are more than 240,000 advanced practice registered nurses (APRN) in the United States with the following breakdown: Nurse Practitioners (NP) -- 141,209 (51% of all APRNs); Clinical Nurse Specialists (CNS) -- 72,521 (24% of all APRNs); Certified Registered Nurse Anesthetists (CRNA) -- 32,523 (13% of all APRNs); Certified Nurse Midwife (CNM) -- 32,523 (4% of all APRNs).

LPN/LVN Data: According to the United States Department of Labor Bureau of Labor Statistics (BLS), employment of LPNs is expected to grow about as fast as average for all occupations through 2014 in response to the long-term care needs of an increasing elderly population and the general growth of health care services. Replacement needs will be a major source of job openings, as many workers will leave the occupation permanently. Applicants for jobs in hospitals may face competition as the number of hospital jobs for LPNs declines; however, rapid employment growth is projected in other health care industries, with the best job opportunities occurring in nursing care facilities and in home health care services. Employment of LPNs in hospital settings is expected to decline. Sophisticated procedures once performed only in hospitals are being performed in physicians' offices and in outpatient care centers such as ambulatory surgical and emergency medical centers, largely because of advances in technology. Employment of LPNs is expected to grow much faster than average in home health care services. Home health care agencies also will offer the most new jobs for LPNs because of an increasing number of older persons with functional disabilities, consumer preference for care in the home, and technological advances that make it possible to bring increasingly complex treatments into the home. Employment of LPNs in nursing care facilities is expected to grow about as fast as average because of the growing number of aged and disabled persons in need of long-term care. In addition, LPNs in nursing care facilities will be needed to care for the increasing number of patients who have been discharged from the hospital but who have not recovered enough to return home.

Certified Nursing Assistants (CNA) Data: According to the United States Department of Labor Bureau of Labor Statistics (BLS), nursing, psychiatric, and home health aides held about 2.1 million jobs in 2004. Nursing aides held the most jobs—approximately 1.5 million. Home health aides held roughly 624,000 jobs and psychiatric aides held about 59,000 jobs. Around 42 percent of nursing aides worked in nursing care facilities, and another 27 percent worked in hospitals. Most home health aides—about 34 percent—were employed by home health care services. Numerous job openings for CNAs will arise from a combination of fast employment growth and high replacement needs. High replacement needs in this large occupation reflect low pay, high physical and emotional demands, and lack of opportunities for advancement. For these same reasons, many people are unwilling to perform the kind of work required by the occupation, limiting the number of entrants. Many aides also leave the occupation to attend training programs for other health care occupations. Overall employment of nursing, psychiatric, and home health aides is projected to grow much faster than average for all occupations through the year 2014, although individual occupational growth rates will vary. Home health aides is expected to be among the fastest growing occupations, as a result of both growing demand for home services from an aging population and efforts to contain costs by moving patients out of hospitals and nursing care facilities as quickly as possible. Consumer preference for care in the home and improvements in medical technologies for in-home treatment also will contribute to much-faster-than-average employment growth for home health aides. Employment of nursing aides is expected to grow faster than average for all occupations through 2014, in response to the long-term care needs of an increasing elderly population. Financial pressures on hospitals to discharge patients as soon as possible should boost admissions to nursing care facilities. As a result, job opportunities will be more numerous in nursing and residential care facilities than in hospitals. Modern medical technology also will drive demand for nursing aides because, as the technology saves and extends more lives, it increases the need for long-term care provided by aides.

School Nurses: A November 2006 Wall Street Journal article examined the nation's 50,000 school nurses, who are facing cuts to school budgets, a nationwide nursing shortage and a growing number of students with serious medical needs. Though federal guidelines suggest that each school nurse attend to no more than 750 children, 59% of school nurses have more students than that in their care. In eleven states, the average school nurse cares for more than

2,000 children, according to the National Association of School Nurses. Among schoolchildren, about 20% have medical issues that require regular attention from a school nurse, NASN Executive Director Amy Garcia said.

NCLEX-RN® Passing Standard Changed: The National Council of State Boards of Nursing, Inc. (NCSBN®) voted at its Dec. 5-7, 2006 meeting to raise the passing standard for the NCLEX-RN® examination (the National Council Licensure Examination for Registered Nurses). The new passing standard is -0.2100 logits on the NCLEX-RN logistic scale, 0.070 logits¹ higher than the previous standard of -0.2800. The new passing standard will take effect on April 1, 2007, in conjunction with the *2007 NCLEX-RN® Test Plan*. After consideration of all available information, the NCSBN Board of Directors determined that safe and effective entry-level RN practice requires a greater level of knowledge, skills, and abilities than was required in 2004, when NCSBN established the current standard. The passing standard was increased in response to changes in U.S. health care delivery and nursing practice that have resulted in the greater acuity of clients seen by entry-level RNs. The Board of Directors used multiple sources of information to guide its evaluation and discussion regarding the change in passing standard. As part of this process, NCSBN convened an expert panel of 11 nurses to perform a criterion-referenced standard setting procedure. The panel's findings supported the creation of a higher passing standard. NCSBN also considered the results of a national survey of nursing professionals including nursing educators, directors of nursing in acute care settings and administrators of long-term care facilities. In accordance with a motion adopted by the 1989 NCSBN Delegate Assembly, the NCSBN Board of Directors evaluates the passing standard for the NCLEX-RN examination every three years to protect the public by ensuring minimal competence for entry-level RNs. NCSBN coordinates the passing standard analysis with the three-year cycle of test plan content evaluation, conducted using a practice analysis of entry-level RNs. This three-year cycle was developed to keep the test content and passing standard current with entry-level practice. A PDF of the *2007 NCLEX-RN® Test Plan* is available free of charge from the NCSBN Web site (https://www.ncsbn.org/RN_Test_Plan_2007_Web.pdf).

The definition of a logit may be found on NCSBN's Web site at https://www.ncsbn.org/02_18_05_brief.pdf

NCSBN Considered Translation of NCLEX Examinations: After careful consideration, the board of directors voted to not support NCLEX examinations translated into other languages, but to continue to monitor and investigate this area strategically. Evidence presented to the board regarding the English/Spanish translation dictionary and expert opinions from the joint research group and others assisted the board in coming to this decision.

NCSBN APRN Advisory Panel: The APRN Advisory Panel has analyzed all feedback received on the APRN Vision Paper and conducted a meeting with the APN Consensus Group to discuss differences in the two papers and development of papers which will hopefully not be in conflict. Future meetings are planned through the Spring of 2007.

http://www.ncsbn.org/pdfs/02_17_06_draft_APRN_Vision_Paper.pdf

STATE ISSUES

SAO Releases A Summary of the State of Texas Workforce for Fiscal Year 2006: From the State Auditors Office, the overall summary of this year's report states, "In fiscal year 2006, Texas state agencies employed 144,934 classified regular full- and part-time employees. An additional 11,076 employees worked in temporary, exempt, and unclassified positions, and an additional 187,550 employees worked at higher education institutions. This report focuses only on employees of state agencies."

“The average state employee is 43.4 years old, earns an annual salary of \$34,817, and has been employed by the State for 10 years. The majority of state employees are female (54 percent) and work in professional positions. The State's workforce is ethnically diverse, with 55 percent white, 23 percent Hispanic, and 21 percent black employees. “

“The State should expect significant competition in recruiting and retaining employees in occupations with the largest job growth (such as systems analysts) and the fastest growing occupations (such as medical technicians). It also should expect significant competition for other highly skilled, hard-to-recruit occupations such as nurses and correctional officers. “

Health Professions Council: The Health Professions Council and the BNE continue to assist the Chiropractic Board on an interim but more limited basis. They have recently hired a new accountant. BNE staff will only do about 3-4 hours of training a month beginning in January.

Two bills were prefiled that require HPC agencies to collect data about health care professionals for workforce planning purposes. A minimum data set defined by the Statewide Health Coordinating Council includes the essential data that the state finds necessary for this purpose and this is the data referenced in the bills. The BNE is providing most of the data and will expand data collection for the few remaining data elements in the near future. HPC has appointed a subcommittee to look at barriers to providing this data for member agencies.

Sunset Decision Report Released: The Sunset Commission final decision report has been released and will be discussed under agenda item 1.3. The report can also be accessed at http://www.sunset.state.tx.us/80thereports/bne/bne_dec.pdf

BOARD ISSUES

BNE Bulletin Articles: The January issue of the *BNE Bulletin* contains the draft position statement on nurses work hours; an announcement of the April public hearing on this document; frequently asked questions on fingerprinting, an article on advanced practice nurses scope of practice; and announcements of George Buchenau's election as Vice-President, Phyllis Rawley's resignation, and Joyce Adams death.

Board Development: Generally at each board meeting, a board development session is held. At this Board meeting, Dr. John Lehman, PhD, Psychologist, will do a presentation on forensic psychological evaluations. This presentation will be held on Friday morning.

January Board Meeting: Meetings of the Executive Director Succession Planning Task Force and the Governance Task Force will be held on Wednesday afternoon preceding the Board meeting. Reports will be made during the full Board meeting.

AGENCY ISSUES

Staffing: We are very pleased to welcome five new investigators on the BNE staff. They are nurse investigators Marcia Wilson, RN and Laura Ferrell, RN; and criminal justice investigators Elise Dunham, Jason Bressie, and William Shanafelt. They will be at the Board meeting to meet you and observe the proceedings.

Website: The new BNE website was launched in December. Board members and some representatives of the Board's advisory committees were asked to review and comment on the site before the launch. The site has been positively received.

Agency Data: The following data reflects agency size and workload:

Total FTEs – **79.7**

Total phone calls for first quarter of FY '07 - **49,988** to main line only

Total Numbers of Licensees:

RN - 194,593 (11,478 APNs)

LVN - 81,140

Total LVN and RN Licensees - 275,733

- Renewals for first quarter FY '07 – 35,171
- Jurisdictional complaints received for first quarter FY '07 – 1,833 (1,024 RN, 809 LVN)
- Complaints resolved first quarter FY '07 1614 – 1614 (954 RN, 660 LVN)
- Licenses sanctioned first quarter FY '07 – 606 (331 RN, 275 LVN)
- Eligibility orders with stipulations first quarter FY '07 – 124
- Eligibility petitions approved without stipulations first quarter FY '07 – 308
- Eligibility petitions denied by the Board first quarter FY '07 – 14

Key Meetings and Presentations: I have attended/presented at the following meetings since the last Board meeting:

- *Conference Call:* Center for Nursing Workforce Studies Advisory Committee to discuss and provide feedback on the draft report on *Supply and Demand for RNs and New Nurse Graduates in Texas*, October 16, 2006.
- *Conference Call:* NCSBN Advanced Practice Registered Nurse (APRN) Advisory Panel to discuss meeting with the APN Consensus Group on the NCSBN APRN Vision Paper and the Alliance paper, October 25, 2006.
- *Presentation:* *BNE Update* to Licensed Vocational Nurses Association of Texas (LVNAT), October 27, 2006, Austin.
- *Meeting:* the Health Professions Council's Ad-hoc Committee on the Minimum Data Set requested by Statewide Health Coordinating Council (SHCC), October 31, 2006, Austin.
- *Conference Call:* NCSBN APRN Advisory Panel on the APRN Vision Paper, November 2, 2006, Austin.
- *Meeting:* State Agency Nursing Leadership Meeting, September 25, 2006, Austin.
- *Conference Call:* With Cindy Parsons, Southside Regional Medical Center School of Nursing, November 13, 2006.
- *Meeting and Testimony:* Sunset Hearing, November 14, 2006, Austin.

- *Meeting:* Representative Howard called a special meeting with stakeholders on Nursing Workforce and Education issues, November 16, 2006, Austin.
- *Meeting:* With Texas Nurses Association and stakeholders to discuss innovation in Nursing Education, November 28, 2006, Austin.
- *Meeting:* NCSBN APRN Advisory Panel Meeting, November 29-December 1, 2006, Chicago.
- *Meeting:* Health Professions Council, December 4, 2006
- *Sunset Hearing:* December 12, 2006, Austin.
- *Conference Call:* With APRN Advisory Panel to discuss meeting with APN Consensus Group, December 13, 2006, Austin.
- *Conference Call:* Nurse Licensure Compact Administrators (NLCA) meeting, December 14, 2006.
- *Meeting:* With Courtney Ambres-Wade, new liaison to the BNE from the State Auditors Office, December 15, 2006, Austin.
- *Conference Call:* With Center for Nursing Workforce Studies Advisory Committee to discuss final report to the Legislature, December 19, 2006. Austin.
- *Meeting:* With NCSBN APRN Advisory Panel and APN Consensus Groups to discuss papers by both organizations on APRN regulation, January 4, 2007, Washington, D.C.

LVN DISCIPLINARY ORDERS AND ENDORSEMENTS
 Time frame: October 1, 2006, through December 30, 2006

DISCIPLINARY	
18	<p>FINE WITH REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 1 Removed and ingested Ibuprofen belonging to a patient 4 Practiced as a vocational nurse without a valid license 6 Non disclosure of criminal history on renewal application/random audit 7 Non compliance with Continuing Education Audit <hr style="width: 10%; margin-left: 0;"/> <p>18</p>
4	<p>FINE</p> <ul style="list-style-type: none"> 4 Non compliance with Continuing Education Audit <hr style="width: 10%; margin-left: 0;"/> <p>4</p>
16	<p>REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 1 Mistakenly documented the administration of medication already administered; failed to administer medication; failed to document the administration of medication 3 Failed to document a change in medical condition 1 Failed to administer and provide prescriptions for five (5) patients 1 Verbally abused a patient during a group meeting 1 Failed to verify the unit dose of a medication ordered by a physician 1 Administered five (5) doses of medication to the wrong patient 1 Inappropriately documented a skin assessment 1 Failed to verify blood type prior to administering 1 Allowed an outpatient patient to draw blood from her assigned patient 1 Failed to review the medication administration sheet for most current orders prior to administering medication; Failed to verify identity of patient 1 Erroneously set a feeding pup at the wrong dose and rate 1 Passed unauthorized telephonic communicated prescriptions for Lorcet Plus tablets 1 Charged with the misdemeanor offenses of Harassment and Driving While Intoxicated 1 Failed to assess, intervene and notify physician of status change in patient <hr style="width: 10%; margin-left: 0;"/> <p>16</p>
16	<p>VOLUNTARY SURRENDER</p> <ul style="list-style-type: none"> 7 Submitted a statement of Voluntary Surrender 1 Charged with the felony offenses of Pornography-Produce/Dist./Poss Juvenile Pornography and Obtaining Property or Money by False Pretenses; Misappropriated and Intemperate use of Vicodin; Attempted to pass a forged prescription for Vicodin 1 Violated professional boundaries 1 Non compliance with previous Board Order 3 Disciplinary action taken by another licensing Board 3 Formal Charges Filed <hr style="width: 10%; margin-left: 0;"/> <p>16</p>

16	<p>TPAPN BOARD ORDER</p> <ul style="list-style-type: none"> 1 Lacked fitness to practice nursing due to mental health issues 1 Non disclosure of criminal history renewal application 1 Intemperate use of Cocaine 1 Intemperate use of Ethanol 1 Formal Charges Filed 1 Signed out Hydrocodone but failed to document the administration; intemperate use of Opiate and Amphetamine; misappropriation of Vicodin 1 Intemperate use of Cannabinoids 1 Under treatment for Major Depression disorder 1 Misappropriated narcotics; lacked fitness to practice nursing; failed to document patient assessments 1 Intemperate use of Morphine 1 Charged with the felony offense of Attempted Distribution of Marijuana; lacked fitness to practice nursing; intemperate use of marijuana 1 Intemperate use of cocaine and Amphetamines 1 Misappropriated and Intemperate use of Lorazepam and Vicodin 1 Charged with two (2) counts of Assault and one (1) count of Public Intoxication 1 Charged with two counts of the misdemeanor offense of Assault Causing Bodily Injury <u>1</u> Misappropriation and intemperate use of Hydrocodone <p>16</p>
42	<p>ENDORSEMENTS</p> <ul style="list-style-type: none"> 1 Denial of Licensure 1 Charged with the misdemeanor offense of Theft; Possession of Stolen Property and Battery 1 Charged with the third degree felony offense of Possession of Marijuana 1 Charged with one felony count and three misdemeanor counts of Passing Bad Checks 1 Charged with three (3) counts of Sexual Abuse and six (6) counts of Prostitution 1 Charged with the felony offense of Obtaining Money by False Pretense 3 Disciplinary action taken by another licensing Board 1 Charged with the felony offense of Theft 1 Charged with the misdemeanor offenses of Shoplifting; Theft; Obscene Language; Resisting Arrest; Disorderly Conduct; and seven (7) counts of Prostitution 1 Charged with two (2) counts of Driving While Intoxicated 13 Non disclosure of criminal history <u>17</u> No Grounds for Denial <p>42</p>

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APPLICANTS/ PETITIONERS

- 3 Denial of Licensure
- 2 Charged with the third degree felony offense of Securing Execution of Document by Deception
- 1 Charged with two (2) counts of Driving While Intoxicated
- 1 Charged with three (3) counts of Public Intoxication
- 1 Charged with the felony offense of Injury to an Invalid and the misdemeanor offense of Driving While Intoxicated
- 1 Charged with three (3) counts of Theft by Check
- 2 Charged with two (2) counts of Theft
- 1 Charged with the felony offense of Injury to a Child and three (3) counts of the misdemeanor offense of Theft by Check
- 1 Charged with the misdemeanor offenses of Minor in Possession; Public Intoxication and Driving While Intoxicated
- 1 Charged with the misdemeanor offenses of Assault Causing Bodily Injury and Disorderly Conduct
- 1 Charged with the misdemeanor offenses of Child Endangerment and three (3) counts of Theft
- 1 Charged with the felony offense of Aggravated Assault with a Deadly Weapon
- 1 Charged with the third degree felony offense of Forgery
- 1 Charged with three (3) counts of Driving While Intoxicated
- 1 Charged with the state jail felony offense of Credit Card Abuse and the misdemeanor offenses of Burglary; Possession of Marijuana and Theft
- 1 Entered treatment for Alcohol Dependence
- 1 Charged with the Felony offense of Forgery
- 1 Charged with the offenses of Possession of a Deadly Weapon and Battery
- 1 Charged with the felony offense of Grand Theft and two (2) counts of Driving While Intoxicated
- 1 Charged with the state jail felony offense of Evading Arrest with Vehicle
- 1 Charged with two (2) counts of Driving While Intoxicated and four (4) counts of Public Intoxication
- 1 Charged with the felony offense of Unauthorized Use of a Credit Card
- 1 Charged with the misdemeanor offenses of Possession of Marijuana; Criminal Mischief and Assault
- 1 Charged with the misdemeanor offense of Driving Under the Influence
- 12 Non disclosure of criminal history
- 182 No Grounds for Denial/Youthful Indiscretion
- 222

RN DISCIPLINARY ORDERS AND ENDORSEMENTS
 Time frame: October 1, 2006, through December 30, 2006

DISCIPLINARY	
22	<p>FINE WITH REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 5 Non disclosure of Criminal History on Renewal Application/Random Audit 1 Falsified information given to the Board 1 Misappropriated Cytotec for a co-worker 1 Failed to notify supervisor prior to leaving assignment 1 Charged with the felony offenses of Possession of Marijuana and Possession with Intent to Deliver 6 Practiced Nursing without a valid license <u>7</u> Non compliance with Continuing Education Audit <p>22</p>
2	<p>FINE</p> <ul style="list-style-type: none"> 1 Non compliance with previous Board Order <u>1</u> Non compliance with Continuing Education Audit <p>2</p>
17	<p>REMEDIAL EDUCATION</p> <ul style="list-style-type: none"> 1 Practiced Nursing without a valid license 1 Failed to assess a suicidal inmate 1 Failed to administer Dilaudid per physician order; failed to initiate nursing intervention to stabilize a patient 1 Sleeping while on duty 1 Charged with the misdemeanor offense of Driving While Intoxicated 1 Withdrew medication in excess of physician order 1 Misappropriated Versed 1 Failed to provide adequate care for patients 1 Non compliance with previous Board Order 1 Documented telephonic prescriptions without a physicians order 1 Failed to document the administration of medications 1 Charged with the felony offense of Credit Card Abuse 1 Administered medication in excess of physicians order 3 Failed to accurately and completely assess a patient <u>1</u> Charged with the misdemeanor offense of Criminal Trespass <p>17</p>
22	<p>TPAPN BOARD ORDER</p> <ul style="list-style-type: none"> 1 Intemperate use of Ethanol, Hydrocodone, Propoxyphene and Tramadol 1 Made False entries in patient medical records and controlled substance record; misappropriated medications; intemperate use of Oxazepam, Alprazolam, Temazepam, and Morphine 3 Charged with two counts of the misdemeanor offense of Driving While Intoxicated 1 Intemperate use of Benzodiazepines, Opiates, and Propoxyphene 1 Misappropriation of Morphine and Dilaudid; intemperate use of Opiates; Morphine, and Dilaudid 4 Intemperate use of Ethanol 1 Intemperate use of Amphetamines and Methamphetamine 1 Misappropriation of Demerol; Intemperate use of Meperidine and Normeperidine 1 Charged with the misdemeanor offense of Forge/Alter Prescription 1 Attempted to pass fraudulent, unauthorized telephonic prescriptions 1 Misappropriation of Demerol; Intemperate use of Benzodiazepines, Demerol, and Propoxyphene <u>6</u> Lacked fitness to practice nursing safely <p>22</p>

21	<p>VOLUNTARY SURRENDER</p> <ul style="list-style-type: none"> 1 Left nursing assignment and was found in an empty room with a syringe in her hand; intemperate use of Morphine and Hydromorphone 1 Charged with the felony offense of Possession of a Controlled Substance by Fraud 3 Lacked fitness to practice safely 1 Misappropriation and intemperate use of Hydrocodone and Morphine 2 Non compliance with previous Board Order 3 Disciplinary action taken by another licensing authority 1 Failed to respond to worsening respiratory status; exhibited behavior indicating a lack of fitness to practice <u>9</u> Submitted a statement of Voluntary Surrender <p><u>21</u></p>
63	<p>ENDORSEMENTS</p> <ul style="list-style-type: none"> 6 Denial of Licensure 8 Non disclosure of criminal history 1 Charged with the class 6 felony offense of Facilitation to Commit the Unlawful Possession of a Narcotic Drug for Sale - Cocaine 3 Entered another licensing Board's Intervention Program 7 Disciplinary action taken by another licensing authority 1 Charged with the felony offense of Attempted Distribution of Marijuana; lacked fitness to practice nursing; intemperate use of marijuana <p><u>37</u> No Grounds for Denial</p> <p><u>63</u></p>
268	<p>APPLICANTS/ PETITIONERS</p> <ul style="list-style-type: none"> 6 Denial of Licensure 10 Non disclosure of criminal history 1 Charged with the misdemeanor offenses of Indecency with a Child; Theft; two counts of Possession of a Weapon; and three counts of Driving While Intoxicated 1 Charged with the second degree felony offense of Forgery 3 Disciplinary action taken by another licensing authority 3 Charged with two (2) counts of Driving While Intoxicated 1 Charged with Public Intoxication and two (2) counts of Driving While Intoxicated 1 Charged with the third degree felony offense of Possession of a Prohibited Weapon 1 Charged with the misdemeanor offense of Public Intoxication; Practice as a GN with a valid permit 1 Diagnosed with Bipolar Disorder 1 Charged with the felony offense of Interfering with Child Custody 1 Charged with the state jail felony offense of Possession of Marijuana and Aggravated Assault with a Deadly Weapon; the misdemeanor offense of Driving While Intoxicated 1 Charged with two (2) counts of Theft 1 Charged with two (2) counts of the felony offense of Forgery of a Financial Instrument 1 Charged with the felony offenses of Theft, Possession of Cocaine and Sexual Assault 1 Charged with the felony offense of Securing Execution of Document by Deception 1 Charged with three (3) counts of Theft by Check and two (2) counts of Minor in Possession 1 Charged with three (3) counts of Theft by Check 1 Charged with the felony offenses of Engaging in Organized Crime, and two counts of Delivery of a Controlled Substance 1 Charged with the felony offenses of Engaging in Organized Crime and Credit Card Abuse 1 Charged with the state jail felony offense of Evading Arrest 1 Charged with the misdemeanor offenses of Possession of Marijuana and Assault 1 Charged with the felony offense of Possession of a Controlled Substance 1 Charged with the misdemeanor offense of False Information to a Police Officer and three counts of Theft 1 Charged with the misdemeanor offenses of Possession of Marijuana and Driving While Intoxicated 1 Charged with the felony offense of Possession of a Controlled Substance with Intent to Deliver 1 Charged with the felony offense of Grand Theft and two (2) counts of Driving While Intoxicated <p><u>223</u> No Grounds for Denial/Youthful Indiscretion</p> <p><u>268</u></p>