#### BEFORE THE TEXAS BOARD OF NURSING

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In the Matter of

§ AGREED

xecutive Director of the Board

Registered Nurse License Number 687026

issued to KIMBERLY JONES

ORDER

On this day the Texas Board of Nursing, hereinafter referred to as the Board, considered the matter of KIMBERLY JONES, Registered Nurse License Number 687026, hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may be subject to discipline pursuant to Section 301.452(b)(9)&(10), Texas Occupations Code. Respondent waived notice and hearing and agreed to the entry of this Order approved by Katherine A. Thomas, MN, RN, FAAN, Executive Director, on April 19, 2017.

## FINDINGS OF FACT

- 1. Prior to the institution of Agency proceedings, notice of the matters specified below in these Findings of Fact was served on Respondent and Respondent was given an opportunity to show compliance with all requirements of the law for retention of the license(s).
- 2. Respondent waived notice and hearing and agreed to the entry of this Order.
- 3. Respondent's license to practice as a professional nurse in the State of Texas is in current status.
- 4. Respondent received an Associate Degree in Nursing from Midland College, Midland, Texas on May 10, 2002. Respondent was licensed to practice professional nursing in the State of Texas on June 25, 2002.
- 5. Respondent's nursing employment history includes:

06/2002 - 09/04

RN

Midland Memorial Hospital Midland, Texas

687026:259 C10esp

Respondent's nursing employment history continued:

09/04 - 07/07	RN	Nurse Unlimited, Inc Odessa, Texas
07/07 - 06/11	RN	Texas Health Arlington Memorial Arlington, Texas
06/10 - 11/10	RN	Texas Oncology Arlington, Texas
12/10 - 11/12	RN	Cook Children's Hospital Fort Worth, Texas
12/12 - 03/15	RN	Texas Health Harris Methodist Hospital H-E-B Bedford, Texas
10/15 - Present	RN	All Care Professional Home Health Arlington, Texas

- 6. At the time of the initial incident, Respondent was employed as a Registered Nurse with Texas Health Harris Methodist Hospital H-E-B, Bedford, Texas, and had been in that position for two (2) years and three (3) months.
- 7. On or about February 19, 2015, while employed as a Registered Nurse with Texas Health Harris Methodist Hospital H-E-B, Bedford, Texas, Respondent misappropriated Morphine, Fentanyl, Propofol, Butarphenol, Diazepam, and Diphenhydramine belonging to the facility and patients thereof, or failed to take precautions to prevent such misappropriation. Respondent's conduct was likely to defraud the facility and patients thereof of the cost of the medications.
- 8. On or about March 12, 2015, Respondent was referred to the Texas Peer Assistance Program for Nurses (TPAPN) for drug use, and subsequently signed a Participation Agreement. On or about September 21, 2016, while participating in TPAPN, Respondent submitted a specimen that resulted positive for Butalbital. In addition, on or about November 10, 2016, Respondent submitted a specimen that resulted positive for Valium, and as a result, Respondent was offered to renew her participation with TPAPN on November 17, 2016. As a result of Respondent's failure to submit the renewal within a timely manner TPAPN closed her case and referred her to the Texas Board of Nursing. Possession of Butalbital and Valium is prohibited by Chapter 481 (Controlled Substances Act) of the Texas Health & Safety Code. The use of Butalbital and Valium by a Nurse, while subject to call or duty, could impair the nurse's ability to recognize subtle signs, symptoms or changes in the patient's condition, and could impair the nurse's ability to make rational, accurate, and appropriate

- assessments, judgments, and decisions regarding patient care, thereby placing the patient in potential danger.
- 9. In response to Findings of Fact Numbers Seven (7) & Eight (8), Respondent states during her employment with Texas Health Resources HEB, she misappropriated morphine, fentanyl, propofol, butorphenol, diazepam, and diphenhydramine from the Pyxis. Respondent states she was in an abusive relationship and was taking medications to give to her partner out of fear for herself. She states she did not use any of the above drugs for her personal use. Respondent further states while enrolled in TPAPN she hadn't had any critical issues until she was hospitalized in September 2016, where she was given butalbital. Respondent states in October 2016, she went to urgent care clinic for a back injury and was given hydromorphone and diazepam. Respondent states she understands it's her fault she failed to recall she was required to report the inpatient stay to her TPAPN case manager; however, she verbally agreed to restart the program and mailed in the paperwork to her case manager.
- 10. The Board finds that there exists serious risks to public health and safety as a result of impaired nursing care due to intemperate use of controlled substances or chemical dependency.

#### **CONCLUSIONS OF LAW**

- 1. Pursuant to Texas Occupations Code, Sections 301.451-301.555, the Board has jurisdiction over this matter.
- 2. Notice was served in accordance with law.
- 3. The evidence received is sufficient to prove violation(s) of 22 Tex. ADMIN. CODE §217.12(1)(A),(1)(B),(4),(5),(6)(G),(8),(9),(10)(A),(10)(E)&(11)(B).
- 4. The evidence received is sufficient cause pursuant to Section 301.452(b)(9)&(10), Texas Occupations Code, to take disciplinary action against Registered Nurse License Number 687026, heretofore issued to KIMBERLY JONES, including revocation of Respondent's license(s) to practice nursing in the State of Texas.
- 5. Pursuant to Section 301.463(d), Texas Occupations Code, this Agreed Order is a settlement agreement under Rule 408, Texas Rules of Evidence, in civil or criminal litigation.

## TERMS OF ORDER

## I. SANCTION AND APPLICABILITY

IT IS THEREFORE AGREED and ORDERED, subject to ratification by the Texas Board of Nursing, that Registered Nurse License Number 687026, previously issued to KIMBERLY JONES, to practice nursing in Texas is hereby **SUSPENDED** and said suspension is **ENFORCED** until Respondent:

<u>Completes a pain management evaluation that meets the requirements specified by the Board</u> in its adopted Guidelines for Physical and Psychological Evaluations, which may be found at the following web address: <a href="http://www.bon.texas.gov/pdfs/eval-guidelines.pdf">http://www.bon.texas.gov/pdfs/eval-guidelines.pdf</a>. RESPONDENT SHALL:

- Notify the performing evaluator of this Order of the Board prior to completing the evaluation;
- Cause the performing evaluator to send a report of the evaluation to the Board's office; and
- Comply with any recommendations made by the evaluator for therapy or other follow-up, in addition to the probationary terms stated herein.

If the evaluation states that the RESPONDENT currently lacks fitness to practice nursing, RESPONDENT'S license(s) to practice nursing SHALL remain SUSPENDED until such time as the same evaluator deems the RESPONDENT safe to return to direct patient care.

IT IS FURTHER AGREED, upon verification of successful completion of the above requirements, the Suspension will be **STAYED**, and RESPONDENT will be placed on **PROBATION** for a minimum of three (3) years **AND** until Respondent fulfills the requirements of this Order.

- D. RESPONDENT SHALL pay all re-registration fees, if applicable, and RESPONDENT'S licensure status in the State of Texas will be updated to reflect the applicable conditions outlined herein.
- E. This Order SHALL apply to any and all future licenses issued to Respondent to practice nursing in the State of Texas.

- F. This Order SHALL be applicable to Respondent's nurse licensure compact privileges, if any, to practice nursing in the State of Texas.
- G. Respondent may not work outside the State of Texas in another nurse licensure compact party state without first obtaining the written permission of the Texas Board of Nursing and the Board of Nursing in the nurse licensure compact party state where Respondent wishes to work.

## II. COMPLIANCE WITH LAW

While under the terms of this Order, RESPONDENT agrees to comply in all respects with the Nursing Practice Act, Texas Occupations Code, §§301.001 *et seq.*, the Rules and Regulations Relating to Nurse Education, Licensure and Practice, 22 Tex. Admin. Code §§211.1 *et seq.*, and this Order.

## III. REMEDIAL EDUCATION COURSE(S)

In addition to any continuing education requirements the Board may require for licensure renewal, RESPONDENT SHALL successfully complete the following remedial education courses within one (1) year of the suspension being stayed, unless otherwise specifically indicated:

- A. A course in Texas nursing jurisprudence and ethics that shall be a minimum of six (6) hours in length. The course's content shall include the Nursing Practice Act, standards of practice, documentation of care, principles of nursing ethics, confidentiality, professional boundaries, and the Board's Disciplinary Sanction Policies regarding: Sexual Misconduct; Fraud, Theft and Deception; Nurses with Substance Abuse, Misuse, Substance Dependency, or other Substance Use Disorder; and Lying and Falsification. Courses focusing on malpractice issues will not be accepted. Home study courses and video programs will not be approved.
- B. The course "Sharpening Critical Thinking Skills," a 3.6 contact hour online program provided by the National Council of State Boards of Nursing (NCSBN) Learning Extension.

In order to receive credit for completion of this/these course(s), RESPONDENT

SHALL CAUSE the instructor to submit a Verification of Course Completion form or SHALL submit the continuing education certificate, as applicable, to the attention of Monitoring at the Board's office. RESPONDENT SHALL first obtain Board approval of any course prior to enrollment if the course is <u>not</u> being offered by a preapproved provider. Information about Board-approved courses and Verification of Course Completion forms are available from the Board at <u>www.bon.texas.gov/compliance</u>.

#### IV. MONETARY FINE

RESPONDENT SHALL pay a monetary fine in the amount of five hundred dollars (\$500.00) within forty-five (45) days of suspension being stayed. Payment is to be made directly to the Texas Board of Nursing in the form of cashier's check or U.S. money order. Partial payments will not be accepted.

## V. EMPLOYMENT REQUIREMENTS

In order to complete the terms of this Order, RESPONDENT must work as a nurse in the State of Texas, providing direct patient care in a clinical healthcare setting, for a minimum of sixty-four (64) hours per month for twelve (12) quarterly periods [three (3) years] of employment. This requirement will not be satisfied until twelve (12) quarterly periods of employment as a nurse have elapsed. Any quarterly period without continuous employment with the same employer for all three (3) months will not count towards completion of this requirement. Periods of unemployment or of employment that do not require the use of a registered nurse (RN) or a vocational nurse (LVN) license, as appropriate, will not apply to this period and will not count towards completion of this requirement.

A. Notifying Present and Future Employers: RESPONDENT SHALL notify each present employer in nursing and present each with a complete copy of this Order, including all attachments, if any, within five (5) days of receipt of this Order. While under the terms of this Order, RESPONDENT SHALL notify all future employers in nursing and present each with a complete copy of this Order, including all attachments, if any, prior to accepting an offer of employment.

- B. Notification of Employment Forms: RESPONDENT SHALL CAUSE each present employer in nursing to submit the Board's "Notification of Employment" form to the Board's office within ten (10) days of receipt of this Order. RESPONDENT SHALL CAUSE each future employer to submit the Board's "Notification of Employment form" to the Board's office within five (5) days of employment as a nurse.
- C. Direct Supervision: For the first year [four (4) quarters] of employment as a Nurse under this Order, RESPONDENT SHALL be directly supervised by a Registered Nurse, if licensed as a Registered Nurse, or by a Licensed Vocational Nurse or a Registered Nurse, if licensed as a Licensed Vocational Nurse. Direct supervision requires another nurse, as applicable, to be working on the same unit as RESPONDENT and immediately available to provide assistance and intervention. RESPONDENT SHALL work only on regularly assigned, identified and predetermined unit(s). RESPONDENT SHALL NOT be employed by a nurse registry, temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-employed or contract for services. Multiple employers are prohibited.
- No Night or Rotating Shifts, Overtime, or On-Call: For the first year [four (4) quarters] of employment as a Nurse under this Order, RESPONDENT SHALL NOT practice as a nurse on the night shift, rotate shifts, work overtime, accept on-call assignments, or be used for coverage on any unit other than the identified, predetermined unit(s) to which Respondent is regularly assigned.
- E. No Critical Care: For the first year [four (4) quarters] of employment as a Nurse under this Order, RESPONDENT SHALL NOT practice as a nurse in any critical care area. Critical care areas include, but are not limited to, intensive care units, emergency rooms, operating rooms, telemetry units, recovery rooms, and labor and delivery units.
- F. No Administration of Controlled Medications: For the first year [four (4) quarters] of employment as a Nurse under this Order, RESPONDENT SHALL NOT administer or have any contact with controlled substances, Nubain, Stadol, Dalgan, Ultram, Propofol, or other synthetic opiates.
- G. Indirect Supervision: For the remainder of the probation period, RESPONDENT SHALL be supervised by a Registered Nurse, if licensed as a Registered Nurse, or by a Licensed Vocational Nurse or a Registered Nurse, if licensed as a Licensed Vocational Nurse, who is on the premises. The supervising nurse is not required to be on the same unit or ward as RESPONDENT, but should be on the facility grounds and readily available

to provide assistance and intervention if necessary. The supervising nurse shall have a minimum of two (2) years experience in the same or similar practice setting to which the Respondent is currently working. RESPONDENT SHALL work only regularly assigned, identified and predetermined unit(s). RESPONDENT SHALL NOT be employed by a nurse registry, temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-employed or contract for services. Multiple employers are prohibited.

H. Nursing Performance Evaluations: RESPONDENT SHALL CAUSE each employer to submit, on forms provided to the Respondent by the Board, periodic reports as to RESPONDENT'S capability to practice nursing. These reports shall be completed by the nurse who supervises the RESPONDENT and these reports shall be submitted by the supervising nurse to the office of the Board at the end of each three (3) month quarterly period for twelve (12) quarters [three (3) years] of employment as a nurse.

## VI. DRUG AND ALCOHOL RELATED REQUIREMENTS

- A. While under the terms of this Order, RESPONDENT SHALL abstain from the use of alcohol, nalbuphine, propofol and all controlled substances, except as prescribed by a licensed practitioner for a legitimate purpose. If prescribed, RESPONDENT SHALL CAUSE the licensed practitioner to submit a written report identifying the medication, dosage and the date the medication was prescribed. The report shall be submitted directly to the office of the Board by the prescribing practitioner, within ten (10) days of the date of the prescription. In the event that prescriptions for controlled substances are required for periods of two (2) weeks or longer, the Board may require and RESPONDENT SHALL submit to a pain management and/or chemical dependency evaluation by a Board approved evaluator. The performing evaluator must submit a written report meeting the Board's requirements to the Board's office within thirty (30) days from the Board's request.
- B. While working as a nurse under the terms of this Order, RESPONDENT SHALL submit to random periodic screens for alcohol, nalbuphine, propofol and controlled substances. The Board will provide instructions on how to enroll in the Board's drug and alcohol testing program following the entry of this Order and screening will begin when RESPONDENT obtains employment and submits the Notification of Employment form to the Board.
  - For the first three (3) month [1<sup>st</sup> quarter] period RESPONDENT works as a nurse under the terms of this Order, random screens shall be performed at least once per week.

- For the next three (3) month [2<sup>nd</sup> quarter] period, random screens shall be performed at least twice per month.
- For the next six (6) month period [3<sup>rd</sup> & 4<sup>th</sup> quarters], random screens shall be performed at least once per month.
- For the remainder of the probation period, if any, random screens shall be performed at least once every three (3) month quarterly period.

All random screens SHALL BE conducted through urinalysis. Any test result for a period of time in which the RESPONDENT is not working as a nurse under the terms of this Order will not count towards satisfaction of this requirement. All screens shall be properly monitored and produced in accordance with the Board's policy on Random Drug Testing. A complete chain of custody shall be maintained for each specimen obtained and analyzed. RESPONDENT SHALL be responsible for the costs of all random drug screening during the stipulation/probation period.

# <u>Specimens shall be screened</u> for any or all of the following substances and/or their metabolites:

Amphetamine	Methamphetamine	MDMA
MDA	Alprazolam	Diazepam
Alpha-o-alprazolam	Alpha-Hydroxytriazolam	Clonazepam
Desmethyldiazepam	Lorazepam	Midazolam
Oxazepam	Temazepam	Amobarbital
Butabarbital	Butalbital	Pentobarbital
Phenobarbital	Secobarbital	Codeine
Hydrocodone	Hydromorphone	Methadone
Morphine	Opiates	Oxycodone
•	Propoxyphene	Cannabinoids
Cocaine	Phencyclidine	Ethanol
Heroin	Fentanyl	Tramadol
Meperidine	Carisoprodol	Butorphanol
Nalbuphine	Ketamine	Propofol
Hydrocodone Morphine Oxymorphone Cocaine Heroin Meperidine	Hydromorphone Opiates Propoxyphene Phencyclidine Fentanyl Carisoprodol	Methadone Oxycodone Cannabinoids Ethanol Tramadol Butorphanol

Upon enrollment in the Board's drug and alcohol testing program, RESPONDENT SHALL, on a daily basis, call or login online to the Board's designated drug and alcohol testing vendor to determine whether or not RESPONDENT has been selected to produce a specimen for screening that day and SHALL, if selected, produce a specimen for screening that same day at an approved testing location and/or comply with any additional instructions from the vendor or Board staff. Further, a Board representative may appear at the RESPONDENT'S place of employment at any time during the probation period and require RESPONDENT to produce a specimen for screening.

Consequences of Positive or Missed Screens. Any positive result for which RESPONDENT does not have a valid prescription or refusal to submit to a drug or alcohol screen may subject RESPONDENT to further disciplinary action, including TEMPORARY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of RESPONDENT's license(s) and nurse licensure compact privileges, if any, to practice nursing in the State of Texas. Further, failure to report for a drug screen, excessive dilute specimens, or failure to call in for a drug screen may be considered the same as a positive result or refusal to submit to a drug or alcohol screen.

C. While under the terms of this Order, RESPONDENT SHALL attend at least two (2) support group meetings each week, one of which must be for substance abuse and provided by Alcoholics Anonymous, Narcotics Anonymous, or another comparable recovery program that has been pre-approved by the Board. RESPONDENT SHALL provide acceptable evidence of attendance. Acceptable evidence shall consist of a written record of at least: the date of each meeting; the name of each group attended; and the signature and printed name of the chairperson of each group attended by RESPONDENT. RESPONDENT SHALL submit the required evidence on the forms provided by the Board at the end of every three (3) month quarterly period. No duplications, copies, third party signatures, or any other substitutions will be accepted as evidence.

## VII. THERAPY

While working as a nurse under the terms of this Order, RESPONDENT SHALL participate in therapy with a professional counselor with credentials approved by the Board. RESPONDENT SHALL CAUSE the therapist to submit written reports, on forms provided by the Board, as to the RESPONDENT'S progress in therapy, rehabilitation and capability to safely practice nursing. The report must indicate whether or not the RESPONDENT'S stability is sufficient to provide direct patient care safely. For the first three (3) month quarterly period RESPONDENT works as a nurse under the terms of this Order, reports are to be submitted to the Board each and every month. If therapy is recommended by the counselor for an additional period of time, the reports shall then be submitted to the Board at the end of each three (3) month quarterly period in which the RESPONDENT is working as a nurse under the terms of this Order, for the remainder of the term of the Order, or until RESPONDENT is dismissed from therapy, whichever is earlier.

#### VIII. FURTHER COMPLAINTS

If, during the period of probation, an additional allegation, accusation, or petition is reported or filed against the Respondent's license(s), the probationary period shall not expire and

shall automatically be extended until the allegation, accusation, or petition has been acted upon by the Board.

## IX. RESTORATION OF UNENCUMBERED LICENSE(S)

Upon full compliance with the terms of this Order, all encumbrances will be removed from RESPONDENT'S license(s) to practice nursing in the State of Texas and RESPONDENT may be eligible for nurse licensure compact privileges, if any.

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## RESPONDENT'S CERTIFICATION

I understand that I have the right to legal counsel prior to signing this Agreed Order. I waive representation by counsel. I have reviewed this Order. I neither admit nor deny the violation(s) alleged herein. By my signature on this Order, I agree to the entry of this Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive judicial review of this Order. I understand that when this Order becomes final and the terms of this Order become effective, a copy will be mailed to me. I understand that if I fail to comply with all terms and conditions of this Order, I will be subject to investigation and disciplinary sanction, including possible revocation of my license(s) to practice nursing in the State of Texas, as a consequence of my noncompliance.

Sworn to and subscribed before me this X

SEAL

THOMAS JACOB BOWLES My Notary ID # 129296359 Expires February 7, 2021

Notary Public in and for the State of lexas

WHEREFORE, PREMISES CONSIDERED, the Texas Board of Nursing does hereby ratify and adopt the Agreed Order that was signed on the <u>8th</u> day of <u>June</u>, 20<u>17</u>, by KIMBERLY JONES, Registered Nurse License Number 687026, and said Order is final.

Effective this 20th day of July , 20 17.

Katherine A. Thomas, MN, RN, FAAN

Executive Director on behalf

of said Board