



I do hereby certify this to be a complete, accurate, and true copy of the document which is on file or is of record in the offices of the Texas Board of Nursing.
Stephanie P. Thomas
Executive Director of the Board

**In the Matter of
Permanent Registered Nurse
License Number 812225
Issued to DANICA ALEXANDRIA HARRISON,
Respondent**

**§ BEFORE THE TEXAS
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§ BOARD OF NURSING**

ORDER OF TEMPORARY SUSPENSION

**TO: DANICA ALEXANDRIA HARRISON
c/o ELISABETH SMITH, ATTORNEY
LEICHTER LAW FIRM, PC
1602 E. 7TH STREET
AUSTIN, TX 78702**

A public meeting of the Texas Board of Nursing was held on September 4, 2018 at 333 Guadalupe, Room 3-460, Austin, Texas, in which the Temporary Suspension of Permanent Registered Nurse License Number 812225, issued to DANICA ALEXANDRIA HARRISON was considered pursuant to Section 301.455, TEXAS OCCUPATIONS CODE. Staff of the Texas Board of Nursing appeared and presented information and evidence concerning the conduct of DANICA ALEXANDRIA HARRISON and whether her continued practice as a nurse would constitute a continuing and imminent threat to the public welfare.

After review and due consideration of the evidence and information presented, the Board finds that the following charge is substantiated:

CHARGE I.

From approximately June 8, 2017, through March 12, 2018, Respondent's minor child, F.H. (Medical Record Number 9546473), underwent several invasive procedures and was unnecessarily treated for symptoms and/or medical conditions the child may not have ever had and may not have needed, based upon exaggerated and/or falsified information communicated to the child's healthcare providers by the Respondent. The Respondent communicated such information to the child's healthcare providers for the purpose of obtaining medical interventions for the child. However, there were discrepancies in the history provided to the child's healthcare providers by the Respondent and what was seen during clinical examinations of the child. Further, there were multiple unexplained clinical findings that did not match the severity of symptoms reported by the Respondent.

On or about January 22, 2018, F.H. was re-admitted to the facility and was not released until April 12, 2018, for a total of 80 days.

During this time period, from March 10, 2018, through March 12, 2018, Respondent was observed on the facility's surveillance system interfering with the child's life sustaining systems and taking a syringe out of her backpack and injecting an unknown liquid into the child's feeding tube. Subsequently Respondent was removed from the child's bedside, and the child was removed from her custody by Child Protective Services.

Since the time the Respondent was removed from the child's bedside, the child has made vast improvements, including, but not limited to: no further episodes of rectal bleeding, no increased output from her G-tube, no further line infections, no further blood infections, and no further need for antibiotics. The child was able to tolerate increased feedings per her G-tube without difficulty and began to take baby foods orally. Further, the child was able to sit with minimal support, pull to stand, and she had full head control.

Ultimately, the child was diagnosed with medical child abuse (as a result of Munchausen Syndrome by Proxy) and was removed from the Respondent's custody by Child Protective Services.

The medical conditions of F.H. (Medical Record Number 9546473), which were largely induced as a result of the Respondent's conduct, were potentially life threatening and could have resulted in the child's death.

The Respondent was employed as a Registered Nurse with Baylor Scott & White at the time of the events and is currently employed as a Registered Nurse with Thrive Skilled Pediatric Care, College Station, Texas. Thrive Skilled Pediatric Care is a pediatric home health agency that provides at home-care to medically fragile children.

The Respondent's conduct directly caused harm and/or was likely to injure the child. Further, the Respondent's conduct may be indicative of a mental health condition that could prevent her from being able to practice nursing with reasonable skill and safety. The Respondent's continued practice as a nurse poses a continuing and imminent threat to the public welfare.

The Texas Board of Nursing further finds that, given the nature of the charges, the continued practice of nursing by DANICA ALEXANDRIA HARRISON constitutes a continuing and imminent threat to public welfare and that the temporary suspension of Permanent Registered Nurse License Number 812225, is justified pursuant to Section 301.455, TEXAS OCCUPATIONS CODE.

NOW, THEREFORE, IT IS ORDERED that Permanent Registered Nurse License Number 812225, issued to DANICA ALEXANDRIA HARRISON, to practice nursing in the State of Texas be, and the same is/are, hereby SUSPENDED IMMEDIATELY in accordance with Section 301.455, TEXAS OCCUPATIONS CODE.

IT IS FURTHER ORDERED that a probable cause hearing be conducted in accordance with Section 301.455(c) not later than seventeen (17) days following the date of the entry of this order, and a final hearing on the matter be conducted in accordance with 301.455(d) not later than the 61st day following the date of the entry of this order.

Entered this 4th day of September, 2018.

TEXAS BOARD OF NURSING

BY: 
KATHERINE A. THOMAS, MN, RN, FAAN
EXECUTIVE DIRECTOR

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§ **BEFORE THE TEXAS**
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FORMAL CHARGES

This is a disciplinary proceeding under Section 301.452(b), Texas Occupations Code. Respondent, DANICA ALEXANDRIA HARRISON, is a Registered Nurse holding License Number 812225, which is in current status at the time of this pleading.

Written notice of the facts and conduct alleged to warrant adverse licensure action was sent to Respondent at Respondent's address of record and Respondent was given opportunity to show compliance with all requirements of the law for retention of the license prior to commencement of this proceeding.

CHARGE I.

From approximately June 8, 2017, through March 12, 2018, Respondent's minor child, F.H. (Medical Record Number 9546473), underwent several invasive procedures and was unnecessarily treated for symptoms and/or medical conditions the child may not have ever had and may not have needed, based upon exaggerated and/or falsified information communicated to the child's healthcare providers by the Respondent. The Respondent communicated such information to the child's healthcare providers for the purpose of obtaining medical interventions for the child. However, there were discrepancies in the history provided to the child's healthcare providers by the Respondent and what was seen during clinical examinations of the child. Further, there were multiple unexplained clinical findings that did not match the severity of symptoms reported by the Respondent.

On or about January 22, 2018, F.H. was re-admitted to the facility and was not released until April 12, 2018, for a total of approximately 80 days. During this time period, from March 10, 2018, through March 12, 2018, Respondent was observed on the facility's surveillance system interfering with the child's life sustaining systems and taking a syringe out of her backpack and injecting an unknown liquid into the child's feeding tube. Subsequently Respondent was removed from the child's bedside, and the child was removed from her custody by Child Protective Services.

Since the time the Respondent was removed from the child's bedside, the child has made vast improvements, including, but not limited to: no further episodes of rectal bleeding, no increased output from her G-tube, no further line infections, no further blood infections, and no further need for antibiotics. The child was able to tolerate increased feedings per her G-tube without difficulty and began to take baby foods orally. Further, the child was able to sit with minimal support, pull to stand, and she had full head control.

Ultimately, the child was diagnosed with medical child abuse (as a result of Munchausen Syndrome by Proxy) and was removed from the Respondent's custody by Child Protective Services.

The medical conditions of F.H. (Medical Record Number 9546473), which were largely induced as a result of the Respondent's conduct, were potentially life threatening and could have resulted in the child's death.

The Respondent was employed as a Registered Nurse with Baylor Scott & White at the time of the events and is currently employed as a Registered Nurse with Thrive Skilled Pediatric Care, College Station, Texas. Thrive Skilled Pediatric Care is a pediatric home health agency that provides at home-care to medically fragile children.

The Respondent's conduct directly caused harm and/or was likely to injure her minor child. Further, the Respondent's conduct may be indicative of a mental health condition that could prevent her from being able to practice nursing with reasonable skill and safety. The Respondent's continued practice as a nurse poses a continuing and imminent threat to the public welfare.

The above action constitutes grounds for disciplinary action in accordance with Section 301.452(b)(10) & (12), Texas Occupations Code, and is a violation of 22 Tex. Admin. Code 22 Tex. Admin. Code §217.12(4) & (6)(C).

NOTICE IS GIVEN that staff will present evidence in support of the recommended disposition of up to, and including, revocation of Respondent's license/s to practice nursing in the State of Texas pursuant to the Nursing Practice Act, Chapter 301, Texas Occupations Code and the Board's rules, 22 Tex. Admin. Code §§ 213.27 - 213.33.

NOTICE IS GIVEN that all statutes and rules cited in these Charges are incorporated as part of this pleading and can be found at the Board's website, www.bon.texas.gov.

NOTICE IS GIVEN that, based on the Formal Charges, the Board will rely on the Disciplinary Matrix, located at 22 TEX. ADMIN. CODE §213.33(b), which can be found under the "Discipline & Complaints; Board Policies & Guidelines" section of the Board's website, www.bon.texas.gov.

Filed this 4th day of September, 2018.

TEXAS BOARD OF NURSING



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