



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.
Katherine A. Thomas
Executive Director of the Board

BEFORE THE TEXAS BOARD OF NURSING

In the Matter of
PAUL CHRISTOPHER DOUCET,
PETITIONER for Eligibility for Licensure

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§

ELIGIBILITY
AGREED ORDER

On this day the Texas Board of Nursing, hereinafter referred to as the Board, considered the Endorsement Application, which has been processed as a Petition for Declaratory Order, herein referred to as the Petition, pursuant to 22 TEX. ADMIN. CODE §217.5(f) & §213.30, and supporting documents filed by PAUL CHRISTOPHER DOUCET, hereinafter referred to as PETITIONER, requesting a determination of eligibility for licensure in compliance with Sections 301.252, 301.257 and 301.260, Texas Occupations Code, and the Board's Rules at 22 TEX. ADMIN. CODE §217.5(f) and §213.30, together with any documents and information gathered by staff and Petitioner's Certification contained herein.

Information received by the Board produced evidence that Petitioner may be ineligible for licensure pursuant to Sections 301.452(b)(8) and 301.453, Texas Occupations Code.

Petitioner waived notice and hearing and agreed to the entry of this Eligibility Agreed Order approved by Katherine A. Thomas, MN, RN, FAAN, Executive Director, on March 20, 2019.

FINDINGS OF FACT

1. On or about December 27, 2018, Petitioner submitted the Petition requesting a determination of eligibility for licensure.
2. Petitioner received an Associate Degree in Nursing from El Centro College, Dallas, Texas, on May 1, 2005.

3. Petitioner completed the Petition and answered Yes to the question which reads as follows:
"Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a professional license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?"
4. On or about March 9, 2017, Petitioner was issued a Consent Order by the Louisiana State Board of Nursing, reinstating his nursing license with probation for a minimum of five (5) years. A copy of the March 9, 2017, Consent Order issued by the Louisiana State Board of Nursing is attached and incorporated, by reference, as part of this Order.
5. After considering the action taken by the Louisiana State Board of Nursing, along with Petitioner's subsequent conduct, the Executive Director is satisfied that Petitioner should be able to meet the requirements of the Nursing Practice Act, the Board's Rules and Regulations, and generally accepted standards of nursing practice.
6. Petitioner completed the Petition and answered Yes to the question which reads as follows:
"Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug?"
7. On or about March 16, 2017, Petitioner signed a Program Agreement with the Louisiana State Board of Nursing Recovering Nurse Program (RNP).
8. The safety of patients and the public requires that all persons licensed to practice nursing be fit, sober, and able to consistently practice nursing in autonomous roles under demanding and stressful conditions.
9. The Executive Director considered evidence of Petitioner's past behavior in light of the factors set out in 22 TEX. ADMIN. CODE §213.27 and determined that Petitioner currently demonstrates the criteria required for licensure.
10. The Executive Director considered evidence of Petitioner's substance use disorder, and subsequent rehabilitation as provided in 22 TEX. ADMIN. CODE §213.29 and in accordance with 22 TEX. ADMIN. CODE §213.33.
11. Petitioner's compliance with the terms of a Board approved peer assistance program should be sufficient to protect patients and the public.
12. The Executive Director's review of the grounds for potential ineligibility has been made on the basis of Petitioner's disclosures.

TERMS OF ORDER

I. ELIGIBILITY FOR LICENSURE AND APPLICABILITY

IT IS THEREFORE AGREED and ORDERED that the PETITION is hereby GRANTED, and upon payment of any required fees and meeting all other applicable requirements, PETITIONER SHALL be issued the applicable license to practice nursing in the State of Texas in accordance with the terms of this Order.

- A. Until successfully completed, any and all licenses issued to Petitioner shall be subject to the terms of this Order.
- B. This Order SHALL be applicable to PETITIONER'S nurse licensure compact privileges, if any, to practice nursing in the State of Texas.
- C. As a result of this Order, PETITIONER'S license will be designated "single state" and PETITIONER may not work outside the State of Texas in another nurse licensure compact party state.

II. COMPLIANCE WITH LAW

While under the terms of this Order, PETITIONER agrees to comply in all respects with the Nursing Practice Act, Texas Occupations Code, §§301.001 *et seq.*, the Rules and Regulations Relating to Nursing Education, Licensure and Practice, 22 TEX. ADMIN. CODE §§211.1 *et seq.*, and this Eligibility Agreed Order.

III. PEER ASSISTANCE PROGRAM REQUIREMENTS

IT IS THEREFORE AGREED and ORDERED that PETITIONER SHALL comply with the following conditions for such a time as is required for PETITIONER to successfully complete the **Texas Peer Assistance Program for Nurses (TPAPN)**:

- A. Within forty-five (45) days following the date of licensure, PETITIONER SHALL apply to TPAPN.

- B. **Within ninety (90) days** following the date of licensure, PETITIONER SHALL sign and execute the TPAPN participation agreement and complete the enrollment process, which SHALL include payment of a non-refundable participation fee payable to TPAPN in the amount of five hundred dollars (\$500.00), if licensed as a registered nurse, or in the amount of three hundred fifty dollars (\$350.00), if licensed as a vocational nurse.
- C. Upon acceptance into the TPAPN, PETITIONER SHALL **waive confidentiality and provide a copy of the executed TPAPN participation agreement to the Texas Board of Nursing.**
- D. PETITIONER SHALL **comply with all requirements of the TPAPN participation agreement** during its term and SHALL keep all applicable license(s) to practice nursing in the State of Texas in current status.
- E. PETITIONER SHALL CAUSE the TPAPN to **notify the Texas Board of Nursing of any violation of the TPAPN participation agreement.**

IV. **REMEDIAL EDUCATION COURSE(S)**

In addition to any continuing education requirements the Board may require for licensure renewal, PETITIONER SHALL successfully complete the following remedial education course(s) **within one (1) year of licensure, unless otherwise specifically indicated:**

A Board-approved 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 and video programs will not be approved.

In order to receive credit for completion of this/these course(s), PETITIONER 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. PETITIONER SHALL first obtain Board approval of any course prior to enrollment if the course is not being offered by a pre-approved provider.

Information about Board-approved courses and Verification of Course Completion forms are available from the Board at www.bon.texas.gov/compliance.

V. EFFECT OF NONCOMPLIANCE

SHOULD PETITIONER fail to comply with this Order or the terms of the participation agreement with the TPAPN, such noncompliance will result in further disciplinary action including TEMPORARY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of PETITIONER'S license(s) and nurse licensure compact privileges, if any, to practice nursing in the State of Texas.

VI. RESTORATION OF UNENCUMBERED LICENSE(S)

Upon full compliance with the terms of this Eligibility Agreed Order, all encumbrances will be removed from PETITIONER'S license(s) to practice nursing in the State of Texas and, subject to meeting all existing eligibility requirements in Texas Occupations Code Chapter 304, Article III, PETITIONER may be eligible for nurse licensure compact privileges, if any.

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PETITIONER'S CERTIFICATION

I am the Petitioner in this matter. I have fully and truthfully disclosed all of my past conduct which could constitute grounds for licensure ineligibility, and I have caused a complete and accurate criminal history to be submitted to the Texas Board of Nursing from each jurisdiction in which I have been adjudged guilty by way of conviction or deferred order. I certify that my past behavior, except as disclosed in my application/petition, has been in conformity with the Board's character rule. I have provided the Board with complete and accurate documentation of my past conduct in violation of the penal law of any jurisdiction which was disposed of through any procedure short of conviction, such as: conditional discharge, deferred adjudication or dismissal. I have no criminal prosecution pending in any jurisdiction.

In connection with my application, I acknowledge that I have read and I understand Sections 301.157(d), 301.252, 301.253, 301.257, 301.258, 301.260, 301.452, and 301.453, Texas Occupations Code, and Chapter 53, Section 53.001 *et seq.*, Texas Occupations Code, and 22 TEX. ADMIN. CODE §§213.27, 213.28, 213.29, and 213.30. I agree with all terms of this Order, including the Findings of Fact and Conclusions of Law and any stipulations as set out in this Order. I acknowledge that this Order is stipulated and I understand that I am not eligible to receive a Temporary Permit to practice nursing. I agree to inform the Board of any other fact or event that could constitute a ground for denial of licensure prior to accepting any license from the Texas Board of Nursing.

I do acknowledge possessing a diagnosis that deems me eligible to participate in the Texas Peer Assistance Program for Nurses. By my signature on this Order, I agree to the Findings of Fact, Conclusions of Law, and Conditions of this Order to obtain disposition of my potential ineligibility for licensure through peer assistance.

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 TEMPORARY SUSPENSION pursuant to Section 301.4551, Texas Occupations Code, or REVOCATION of my license(s) and/or nurse licensure compact privileges, if any, to practice nursing in the State of Texas, as a consequence of my noncompliance.

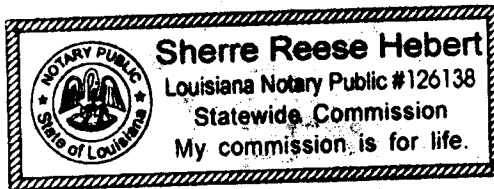
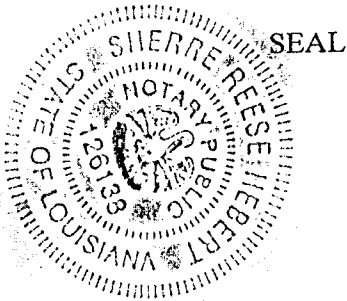
I understand that I can be represented by an attorney in this matter. I waive representation by counsel, notice, administrative hearing, and judicial review of this Order and request that the Texas Board of Nursing ratify this Order.

Signed this 3 day of June, 2019

Paul Christopher Doucet
PAUL CHRISTOPHER DOUCET, Petitioner

Sworn to and subscribed before me this 3rd day of June, 2019.

Sherre Reese Hebert #126138
Notary Public in and for the State of Louisiana



WHEREFORE, PREMISES CONSIDERED, the Executive Director, on behalf of the Texas Board of Nursing does hereby ratify and adopt the Eligibility Agreed Order that was signed on the 3rd day of June, 2019, by PAUL CHRISTOPHER DOUCET, PETITIONER for Eligibility for Licensure, and said Eligibility Agreed Order is final.

Effective this 11th day of June, 2019.



Katherine A. Thomas, MN, RN, FAAN
Executive Director on behalf
of said Board

RECEIVED

LOUISIANA STATE BOARD OF NURSING
BATON ROUGE, LOUISIANA

MAR 17 2015
Louisiana State Board of Nursing
RN11383
CONSENT ORDER

IN THE MATTER OF:
PAUL CHRISTOPHER DOUCET *
210 ST MATTHEW DR *
CHURCH POINT, LA 70525 *
Respondent

TERMS AGREED TO BY LICENSEE

I, PAUL CHRISTOPHER DOUCET (**Respondent**) voluntarily agree to sign and have terms of agreement for the purpose of avoiding a formal hearing with the Louisiana State Board of Nursing.

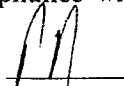
I, PAUL CHRISTOPHER DOUCET do hereby say that I freely, knowingly and voluntarily enter into this agreement. I understand that I have a right to a hearing in this matter and I freely waive such right. I understand that I have a right to legal counsel prior to entering into this agreement.

I admit to and acknowledge that the Louisiana State Board of Nursing makes the following **FINDINGS OF FACT**:

1. On August 8, 2005, Respondent was licensed by examination to practice as a registered nurse in Louisiana;
2. On July 31, 2014, a signed program agreement with the Recovering Nurse Program was received at the Board Office.
3. That Respondent was diagnosed with Alcohol Dependency and the treatment team recommended residential treatment.
4. That on August 18, 2014, Respondent requested to Voluntarily Surrender his license.
5. On September 14, 2014, a Consent Order for Voluntary Surrender of licensure for a minimum of two (2) years became effective.
6. Respondent requested reinstatement of license following six (6) months compliance with RNP, submission of required CE hours, and reinstatement application.

I hereby acknowledge that I have complied with all of the stipulations for reinstatement. I further attest to my intent to comply with all stipulations of this Consent Order.

To facilitate submission of this Consent Order, I do not offer any defense to the **FINDINGS OF FACT**. I agree that the Board has jurisdiction of this matter pursuant to L.R.S. 37:911 et seq. I admit to the findings of fact and agree that there is sufficient evidence upon which to predicate a finding of violation of the provisions of L.R.S. 37:921. I agree that the Board may treat the allegations of fact and law as true, which finding shall have the same force and effect as if evidence and argument were presented in support of the allegations and, based thereon, the Board found the allegations to be true. I specifically waive my right to contest these findings in any subsequent proceedings before the Board. I understand that this Consent Order shall constitute a public record and is disciplinary action by the Board. This will be reported to **National Practitioner Data Bank (NPDB) as 1282 License Restored or Reinstated, Conditional, F2 Unable to Practice Safely by Reason of Alcohol or Other Substance.** NPDB Narrative: By Consent Order, Respondent's suspension is stayed and Respondent's license is reinstated with probation for a minimum of five (5) years and continued compliance with the


Initials

LOUISIANA STATE BOARD OF NURSING
BATON ROUGE, LOUISIANA

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MAR 11 2011

RN113133 Louisiana State
Board of Nursing
CONSENT ORDER

IN THE MATTER OF:
PAUL CHRISTOPHER DOUCET *
210 ST MATTHEW DR *
CHURCH POINT, LA 70525 *

Respondent

TERMS AGREED TO BY LICENSEE (Cont'd)

Recovering Nurse Program after RN demonstrated sufficient compliance with the Recovering Nurse Program.

In order to avoid further administrative proceedings, I hereby consent to accept and abide by the following ORDER of the Board: Respondent's suspension is stayed and Respondent's license is reinstated with probation for a minimum of five (5) years contingent upon adherence to the following stipulations:

1. Within five (5) days, sign and adhere to a new RNP agreement for a minimum of five (5) years.
2. Prior to beginning to work, inform all nursing employers of these disciplinary measures and of the probationary status of license. Respondent is responsible to submit a copy of all pages of this agreement to each employer and nursing supervisor.
3. Prior to beginning to work, shall cause all employers to submit to the Board, signed Employment Agreement from each employer.
4. Work in a restrictive environment as a member of a treatment team rather than alone or with a few employees. Additionally, not be employed in any unsupervised setting. Must be directly supervised by an on-site registered nurse or other healthcare professionals that is higher on the organizational chart than Respondent. Not be employed in agency/pool/staffing, home health services, or nursing homes.
5. Have all immediate nursing supervisors submit a performance evaluation report bimonthly, commencing from the first date of employment. Bi-monthly reports are due on or before the first of January, March, May, July, September, and November.
6. Shall remain free of alcohol and all unprescribed mood altering substances. Any mood altering, addictive, or dependency-inducing substance must be currently prescribed for a bona fide medical condition by a physician (or other qualified treating prescriber(s)) knowledgeable about the individual's history and the information underlying the Board's concerns. All prescribed drugs must be verified in writing to the Board on a specified form by the prescribing physicians/qualified prescriber(s) within five (5) days from the effective date of this agreement/order and within five (5) days from the date(s) of any new prescriptions. The Board reserves the right to have a LSBN recognized addictionist review and approve the prescriptions for continued nursing practice.
7. Shall maintain complete and total abstinence from any and all potentially addictive chemicals whether over-the-counter, scheduled or unscheduled (including but not limited to alcohol, alcohol containing products, marijuana, tranquilizers, sedatives, stimulants, narcotics, opioids including ultram (tramadol), nubain, soporifics, androgenic steroids, or any other addictive drug) except as prescribed for a bona fide medical condition by a healthcare provider who is knowledgeable in, and aware of Respondent's history with the Board.
8. Shall voluntarily submit to random and observed drug screens, for a minimum of 24 times a year, inclusive of bodily fluids, breath analysis, hair analysis, or any other procedure as may be directed by the Board and/or employer. If selected for a screen, failure to provide sufficient specimen (bodily fluids, hair, nails etc.) for analysis or failure to test may be considered a positive screen. Random drug screens will be a minimum of 24 times a year. It is the Respondent's responsibility to assure

LOUISIANA STATE BOARD OF NURSING
BATON ROUGE, LOUISIANA

RECEIVED

MAR 27 2017

IN THE MATTER OF:
PAUL CHRISTOPHER DOUCET
210 ST MATTHEW DR
CHURCH POINT, LA 70525


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RN113133 Louisiana State
Consent Order Board of Nursing

Respondent

TERMS AGREED TO BY LICENSEE (Cont'd)

- that lab personnel observe all urine specimen collections. If urine specimen collection is not observed the results are invalid. The Respondent agrees to call the toll free number or check the testing notification via computer daily. Compliance with checking daily is monitored and failure to check may result in additional screens. It is the Respondent's responsibility to maintain a current account with testing administrator. If Respondent misses a test due to a suspended account or fails to test on the day of notification it will be considered a positive screen and appropriate action will be taken including but not limited to, further evaluation, additional testing, and suspension of license. The results of any such testing will be reported directly to the Board. Any and all such testing shall be performed at Respondent's expense. Additional screenings may be requested by Board staff. Written reports of same shall be submitted to the Board. After one year of compliance, may request a reduction in the number of drug screens.
9. Shall avoid exposure to anything that will cause a urine drug test to be positive. In that regard, Respondent shall avoid such items as "hemp oil" "coca tea" and poppy seeds (which can be found in curry sauces, breads, salad dressings, and in or on other foods). Respondent agrees to not use ethyl alcohol in any form (including N.A. or alcohol- "free" wine or beer, over-the-counter drugs containing alcohol (cough syrup, Nyquil or other similar OTC drugs or supplements), mouthwash or other hygiene products containing ethanol, foods containing ethanol (desserts, vanilla extract, etc.), communion wine, sanitizing hand or body gels (Purell or other), or any other form of ethyl alcohol). Intentional use of any of these products or medications without a physician's order is a violation of this order.
 10. Respondent/Applicant agrees to execute a written authorization, along with execution of this Consent Order/agreement, allowing the Louisiana State Board of Nursing, and any authorized designees thereof, to access prescription monitoring information submitted to, or maintained by, the Louisiana Board of Pharmacy through its Prescription Monitoring Program (PMP) for the purpose of monitoring compliance with this agreement/Order and to determine fitness and ability to practice nursing with reasonable skill and safety. Respondent shall cause to be submitted a completed authorization release form to the Louisiana Board of Pharmacy and shall cause information and reports to be sent to the Louisiana State Board of Nursing, such written authorization to be effective for the duration of this Consent Order/agreement. Respondent may also be required during this time period duration to provide to the board/board staff copies of prescription monitoring information maintained by the Board of Pharmacy.
 11. Immediately (within 72 hours) inform the Board in writing of any change in address.
 12. Immediately inform the Board in writing of all places of employment. If employment changes, the Board shall be immediately (within 72 hours) notified in writing.
 13. If unemployed, inform the Board in writing on a quarterly basis.
 14. Shall engage in the practice of professional nursing in Louisiana for a minimum of twenty-four (24) hours per week for a minimum of twelve (12) consecutive months.
 15. By the first of each month, submit a monthly probation fee of twenty-five dollars (\$25.00) to the Board, beginning April 1, 2017.
 16. Within ten (10) months, submit payment of \$200.00 to the Board as cost of this Consent Order at a rate of \$20.00 per month beginning April 1, 2017.


Initials

LOUISIANA STATE BOARD OF NURSING
BATON ROUGE, LOUISIANA

RECEIVED

IN THE MATTER OF:
PAUL CHRISTOPHER DOUCET
210 ST MATTHEW DR
CHURCH POINT, LA 70525

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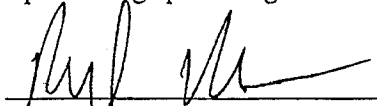
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RN113133
Louisiana State
Board of Nursing
CONSENT ORDER

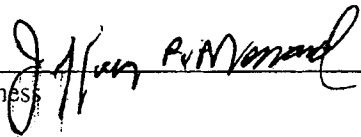
Respondent


TERMS AGREED TO BY LICENSEE (Cont'd)

- 17. Not have any misconduct, criminal violations or convictions, or violations of any health care regulations reported to the Board related to this or any other incidents.
- 18. Failure to comply with the above orders, receipt of an unfavorable report, or non-receipt of reports on or before the date due shall result in the immediate suspension of this Respondent's license. This suspension can be imposed by action of the staff subject to the discretionary review of the Board.

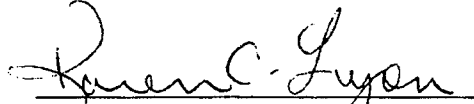
I, PAUL CHRISTOPHER DOUCET, understand that this agreement is effective immediately upon signature of the Executive Director. It is also understood that this agreement does not preclude the Board of Nursing from requiring a formal hearing of my case. I further understand that should the Consent Order not be accepted by the Board, I agree that presentation to and consideration of the Consent Order, the documentary evidence and information by the Board shall not unfairly or illegally prejudice the Board or any of its members from participation in hearings or other proceedings pertaining to these or other matters regarding this Respondent.

Dated this 5 day of March, 2017 
PAUL CHRISTOPHER DOUCET


Witness


Witness

LOUISIANA STATE BOARD OF NURSING

 3/9/17
Karen C. Lyon, PhD, RN, NEA Date
Executive Director


Initials