BEFORE THE INDIANA STATE BOARD OF NURSING
CAUSE NUMBER: 2012 NB-267

IN THE MATTER OF THE LICENSE OF:)
JAMA LYNN OWENS, R.N.)
LICENSE NO: 28186116A)

FINAL ORDER ACCEPTING PROPOSED FINDINGS OF FACT, CONCLUSIONS OF LAW, AND ORDER

The State of Indiana ("Petitioner"), by Patricia Gibson, Deputy Attorney General, and Jama Lynn Owens, R.N., ("Respondent"), signed a Proposed Settlement Agreement ("Agreement") which purports to resolve all issues involved in the action by Petitioner and the Indiana State Board of Nursing ("Board") regarding the Respondent's license, and which Agreement has been submitted to the Board for approval.

The Board, after reviewing the Agreement at the November 15, 2012, meeting held in the Auditorium of the Indiana Government Center South, 302 West Washington Street, Indianapolis, Indiana, now finds it has been entered into fairly and without fraud, duress, or undue influence, and is fair and equitable between the parties. The Board hereby incorporates the Agreement which is attached hereto and incorporated herein as **Exhibit A** and approves and adopts in full the Agreement as a resolution of this matter. The Board approved this Agreement by a vote of 5-0-0. Incorporated into the Agreement was the consensus of both parties to Findings of Fact, Conclusions of Law, and Order.

WHEREFORE, the Board hereby accepts and approves the Agreement, settling all matters in this case consistent with the terms of the Agreement between the parties, and Respondent is hereby ORDERED to abide by all the terms of the Agreement.

SO ORDERED, this 20 day of November, 2012.

INDIANA STATE BOARD OF NURSING

By: _____

Frances L. Kelly, Executive Director
Indiana Professional Licensing Agency

BEFORE THE INDIANA STATE BOARD OF NURSING
CAUSE NUMBER: 2012 NB 267

IN THE MATTER OF THE LICENSE OF:)
JAMA LYNN OWENS, R.N.)
LICENSE NO: 28186116A)

PROPOSED SETTLEMENT AGREEMENT

The State of Indiana ("Petitioner"), by Patricia Gibson, Deputy Attorney General, and Jama Lynn Owens, R.N., ("Respondent") hereby execute this Agreement to a disposition of the Complaint filed in this cause. This Agreement is subject to the review and approval of the Indiana State Board of Nursing ("Board") pursuant to Ind. Code § 25-1-9 *et seq.* and the Administrative Orders and Procedures Act, Ind. Code § 4-21.5-3 *et seq.*

STIPULATED FACTS

1. Respondent is a Registered Nurse ("RN") in the State of Indiana having been issued license number 28186116A on July 16, 2009. Respondent's address on file with the Indiana Professional Licensing Agency is 2818 Briar Bush Lane, Fort Wayne, Indiana 46815.

2. On or about September 27, 2009, Respondent was employed as a RN on an as needed basis, PRN, at Parkview Noble Hospital located in Kendallville. Indiana.

3. On or about August 16, 2010, Respondent was employed as a RN at Select Specialty Hospital ("Select") located in Fort Wayne, Indiana.

4. On or about November 30, 2010, Patient A complained of abdominal pain and there was concern he had pulled his percutaneous endoscopic gastrostomy ("PEG") tube during the night.

Exhibit A

5. On or about November 30, 2010, Respondent claims the off-going nurse informed her that Patient A may have pulled out his PEG tube and Patient A was scheduled for a plain frontal supine radiograph of the abdomen ("KUB") later that morning.

6. On or about November 30, 2010, Respondent claims she assessed Patient A at the beginning of her shift and Patient A was afebrile, his vital signs were stable and there were no signs of pain or discomfort. Patient A was nonverbal due to a tracheostomy.

7. On or about November 30, 2010, Respondent failed to document any change of condition or treatment concerning Patient A's PEG tube placement.

8. On or about November 30, 2010, later that morning, Respondent claims Patient A experienced an episode of rapid respirations and a diaphoresis while still afebrile and all vital signs normal except for respirations. The cause of the episode was not clear.

9. On or about November 30, 2010, later that morning, Respondent claims she notified her charge nurse of the change in Patient A's condition and both nurses assessed Patient A. Respondent claims she informed her charge nurse that Patient A was to have a KUB. According to radiology it had not yet been performed.

10. On or about November 30, 2010, Respondent claims she was unable to find the written order for the KUB that the off-going nurse informed her about. Respondent claims radiology was on the floor and ready to do the KUB. Respondent claims her charge nurse also looked in the chart and could not find the order. Respondent claims her charge nurse instructed her to write another order. Both nurses thought the order was in the chart, but they just had been unable to locate it.

11. On or about November 30, 2010, Respondent failed to contact the physician for the KUB order and documented the order was a verbal order from the physician. Respondent failed to inform the physician of Patient A's change in condition.

12. On or about November 30, 2010, Respondent claims the KUB was performed, Patient A was no longer diaphoretic and his respirations returned to within normal limits. Respondent claims the episode and return to normal conditions were charted on the 24 hour flow sheet in the nursing notes.

13. On or about November 30, 2010, Respondent claims she showed the KUB results to her charge nurse who stated the results seemed to be in order and perhaps Patient A was constipated. Respondent claims she did not remember to notify the physician because Patient A was no longer in distress and her charge nurse stated the results seemed to be in order. Respondent claims her charge nurse was a substitute charge nurse who had over twenty years experience.

14. On or about November 30, 2010, the KUB failed to verify the placement of the PEG tube and Respondent used the PEG tube for Patient A's feeding.

15. On or about November 30, 2010, Respondent claims Patient A's condition, including vital signs and pain and discomfort level were all within normal limits at the end of Respondent's shift and were charted on the 24 hour flow sheet in the nursing notes.

16. On or about December 9, 2010, Respondent was terminated for practicing outside the scope of her license by writing a verbal order without obtaining physician approval, falsification of a verbal order from a physician, failure to document a condition or treatment change for Patient A, failure to perform an assessment and reassessment for Patient A, and failure to obtain a KUB order to verify the PEG tube placement.

17. On or about August 28, 2011, Respondent was placed on full-time status at Parkview Noble Hospital.

18. On or about October 5, 2011, Respondent renewed her Indiana nursing license and answered "No" to all questions, including question five which asks, "Since you last renewed have you ever been terminated, reprimanded, disciplined or demoted in the scope of your practice as a nurse or as another health care professional?" failing to disclose her 2010 termination from Select.

19. On or about February 16, 2012, Respondent received her annual review at Parkview Noble Hospital. The review stated Respondent exceeded expectations, had a bright attitude, and was compassionate, doing well clinically, a hard worker, and a team player.

STIPULATED CONCLUSIONS OF LAW

The parties further stipulate:

1. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(4)(B) in that Respondent has become unfit to practice due to failure to keep abreast of current professional theory or practice and evidenced by failure to document a condition or treatment change for Patient A and failure to obtain a KUB order to verify the PEG tube placement.

2. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(1)(B) in that Respondent engaged in fraud or material deception in the course of professional services or activities as evidenced by the falsification of a verbal order from a physician.

3. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(4)(A)(i) in that Respondent has continued to practice although Respondent has become unfit to practice due to professional incompetence that may include the undertaking of professional activities

Respondent is not qualified by training or experience to undertake as evidenced by writing a verbal order without obtaining physician approval.

4. Respondent's conduct violated Ind. Code § 25-1-9-4(a)(1)(A) in that Respondent has engaged in or knowingly cooperated in fraud or material deception in order to obtain a license to practice as evidence by failing to disclose her 2010 termination from Select on her 2011 licensure renewal.

AGREED DISPOSITION

It is now therefore agreed by Respondent and Petitioner as follows:

1. The Board has jurisdiction over Respondent and the subject matter in this disciplinary action.

2. The parties execute this Agreement voluntarily.

3. Both parties voluntarily waive their rights to a public hearing on the Complaint.

4. Petitioner agrees that the terms of this Agreement will resolve any and all pending claims or allegations relating to disciplinary action against Respondent's Indiana nursing license.

5. Within ninety (90) days of the Final Order, Respondent shall successfully complete forty-eight (48) hours of continuing education with: twelve (12) hours in assessment, twelve (12) hours in documentation, six (6) hours in ethical/legal issues and eighteen (18) hours in critical care/med-surg nursing/PEG tubes. Certificates of completion shall be sent to the following address:

Indiana Professional Licensing Agency
Attn. Nursing Group 2
402 West Washington Street Room W072
Indianapolis, Indiana 46204

6. Within ninety (90) days of the Final Order, Respondent shall pay a **FINE** in the amount of **FIVE HUNDRED DOLLARS ($500.00)** payable to the Indiana Professional Licensing Agency. This fee shall be paid by check or money order payable to the State of Indiana, and submitted to the following address:

Indiana Professional Licensing Agency
Attn. Nursing Group 2
402 West Washington Street Room W072
Indianapolis, Indiana 46204

7. Within thirty (30) days of the Final Order, Respondent shall, pursuant to Ind. Code § 4-6-14-10 (b), pay a fee of **Five Dollars ($5.00)** to be deposited into the Health Records and Personal Identifying Information Protection Trust Fund This fee shall be paid by check or money order payable to the State of Indiana, and submitted to the following address:

Office of the Indiana Attorney General
Attn: Katie Thorpe
302 West Washington Street, 5th Floor
Indianapolis, IN 46204

8. Respondent has carefully read and examined this agreement and fully understands its terms and that, subject to a final order issued by the Board, this Agreement is a final disposition of all matters and not subject to further review.

9. Respondent further understands that a violation of the Final Order, any non-compliance with the statutes or regulations regarding the practice of nursing, or any violation of this Settlement Agreement may result in Petitioner requesting a summary suspension of Respondent's license, an Order to Show Cause as may be issued by the Board, or a new cause of

action pursuant to Ind. Code § 25-1-9-4, any or all of which could lead to additional sanctions, up to and including a revocation of Respondent's license.

10. The parties agree to the continuing jurisdiction of the Board and that the discipline agreed to, terms of discipline, and licensure status will apply even if the Board renews Respondent's license at a later date.

Jama Lynn Owens
Jama Lynn Owens, R.N.
Respondent

11/05/12
Date

Patricia Gibson
Deputy Attorney General
Attorney No. 12011-49

11/7/12
Date

STATE OF Indiana)
) SS:
COUNTY OF Allen)

Before me a Notary Public for said County and State, personally appeared **Jama Lynn Owens, R.N.**, first duly sworn by me upon his oath, says that the facts alleged in the foregoing instrument are true.

Signed and sealed this 5 day of November, 2012.

Signature

Tracy A Burgess
Printed

My Commission Expires: 10-25-14

County of Residence: Allen

CERTIFICATE OF SERVICE

I certify that a copy of the "Final Order Accepting Proposed Findings of Fact, Conclusions of Law and Order" has been duly served upon:

Jama Lynn Owens, RN
2818 Briar Bush Lane
Fort Wayne, Indiana 46815
Service by U.S. Mail

Patricia Gibson
Indiana Government Center South, Fifth Floor
302 West Washington Street
Indianapolis, Indiana 46204-2770
Service by Email

11-20-2012
Date

First/Last Name of Person Mailing

Indiana State Board of Nursing
Indiana Government Center South
402 West Washington St., Room W072
Indianapolis, IN 46204
Phone: 317-234-2043
Fax: 317-233-4236
Email: pla2@pla.in.gov

Explanation of Service Methods
Personal Service: by delivering a true copy of the aforesaid document(s) personally.
Service by U.S. Mail: by serving a true copy of the aforesaid document(s) by First Class U.S. Mail, postage prepaid.
Service by Email: by sending a true copy of the aforesaid document(s) to the individual's electronic mail address.