VIRGINIA:

BEFORE THE BOARD OF NURSING

IN RE:

PAMELA ALLISON, L.P.N.

License No.: 0002-056982

ORDER

In accordance with §§ 2.2-4019, 2.2-4021 and 54.1-2400(10) of the Code of Virginia (1950), as

amended ("Code"), an informal conference was conducted on behalf of the Board of Nursing ("Board")

on October 17, 2012, in Henrico County, Virginia. Pamela Allison, L.P.N., was present and was not

represented by legal counsel. Judith Piersall, R.N., B.S.N., serving as Agency Subordinate for the Board,

submitted a Recommended Decision for consideration.

On November 14, 2012, a quorum of the Board met to receive and act upon the Recommended

Decision of the Agency Subordinate. Ms. Allison was present and was not represented by legal counsel.

Based upon its review of the Recommended Decision of the Agency Subordinate, the Board

makes the following Findings of Fact and Conclusions of Law and issues the following Order.

FINDINGS OF FACT

Pamela Allison, L.P.N., was issued License No. 0002-056982 to practice practical nursing 1.

in Virginia on September 29, 1998. The license is scheduled to expire on February 28, 2013. Her primary

state of residence is Virginia.

2. By letter dated September 20, 2012, the Board of Nursing sent a Notice of Informal

Conference ("Notice") to Ms. Allison notifying her that an informal conference would be held on October

17, 2012. The Notice was sent by certified and first class mail to 259 American Drive, Ruther Glen,

Virginia 22546, the address of record on file with the Board of Nursing.

3. During the course of her employment with Hughes Home Assisted living facility,

Fredericksburg, Virginia, on February 26, 2012, Ms. Allison falsely documented administering Percocet

(oxycodone and acetaminophen, Schedule II) to a resident at 2:00 p.m., when the resident was not at the facility at that time and did not return until approximately 4:00 p.m. Her employment was terminated on February 28, 2012, as a result of this incident.

- 4. Ms. Allison stated at the informal conference that she has had 26 surgeries, including three gastric bypass surgeries, and has been on and off narcotic medications for numerous health problems since the early 1980s. She stated that she has been working as a nurse aide or nurse the entire time, except for a period between 2000 and 2003, when she was taking Dilaudid for pseudo-seizures and migraines and she concluded that she was not able to practice safely.
- 5. Ms. Allison stated that she has had a dependence on narcotics in the past but did not consider herself to be dependent at this time. She stated that she received outpatient substance abuse treatment with Family Counseling Services in approximately 2006 and attended a 28-day substance abuse inpatient program at Life Center of Galax in 2007 or 2008. She said that she believed she was in control of her taking mood-altering substances at this time.
- 6. Currently, Ms. Allison is followed by a primary care physician, a urologist, an orthopedist, a psychiatrist, gastroenterologist, and a neurologist. She takes verapamil, Lasix, potassium chloride, urocit-k, Prilosec, Zantac, Elavil, vitamin B-6, and Prozac. She also takes PRN Ativan for anxiety most days. Her primary care physician prescribed Suboxone to help her with narcotic dependence, but she acknowledged that she takes Suboxone as needed for pain and not as prescribed. She stated that she last took a narcotic the weekend before the informal conference for dental pain.
- 7. Ms. Allison stated that, in the past, if she was going to work, she would not take any narcotics. She then stated that if she felt sick at work she would try to get someone to replace her, but if she could not find a replacement, she would go ahead and take her narcotic medication. She stated that she had a very high tolerance for pain medications due to absorption issues following multiple gastric

bypass surgeries.

- 8. Ms. Allison reported the following employment history since receiving her nursing license in 1998:
- a. She worked for the Department of Corrections for two years, then she was out of work for two years due to the aforementioned pseudo-seizures.
- b. She worked for Nursefinders for three years. Her employment was terminated in 2006 for allegedly failing to give medications to 19 residents of a long-term care facility.
 - c. She was an emergency medical technician for an unknown period of time.
 - d. She worked for Cuidado Casero home health care for one and a half years.
 - e. She was employed by Hughes Home for approximately six months.
- f. She worked for Wilburn Gardens for a month and half in 2012, but left due to anxiety. She stated that she resigned after she was written up for having "holes" in her medication administration records.
 - g. She is not currently employed.
- 9. Ms. Allison did not express any insight into how her chemical dependency and/or multiple underlying health problems could impair her ability to practice safely, even though she acknowledged regularly taking narcotic pain medications while on duty.

CONCLUSIONS OF LAW

- 1. Finding of Fact #3 constitutes a violation of § 54.1-3007(2), (5), and (8) of the Code and 18 VAC 90-20-300(A)(2)(e) of the Regulations Governing the Practice of Nursing.
 - 2. Finding of Fact #s 4-6 constitute a violation of § 54.1-3007(6) of the Code.

ORDER

WHEREFORE, it is hereby ORDERED as follows:

- 1. The Board shall TAKE NO ACTION contingent on Ms. Allison's entry into and compliance with the Health Practitioners' Monitoring Program ("HPMP") within 30 days of the entry of this Order.
- 2. Any violation of the terms and conditions stated in this Order shall be reason for revoking the license of Ms. Allison, and an administrative proceeding shall be held to decide whether her license should be revoked. Ms. Allison shall be noticed to appear before the Board at such time as the Board is notified that:
 - a. She has failed to make application to the HPMP;
- b. She is not in compliance with the terms and conditions of the HPMP, or has been terminated from participation in the HPMP;
- c. There is a pending investigation or unresolved allegation against her involving a violation of law or regulation or any term or condition of this Order; or
- d. She has successfully completed the above-referenced period of participation in the HPMP. However, upon receipt of Ms. Allison's participation in and compliance with the HPMP, the Board, at its discretion, may waive her appearance before the Board and conduct an administrative review of this matter.
- 3. This Order is applicable to Ms. Allison's multistate licensure privileges, if any, to practice practical nursing in the Commonwealth of Virginia. For the duration of this Order, Ms. Allison shall not work outside of the Commonwealth of Virginia pursuant to a multistate licensure privilege without the written permission of the Virginia Board of Nursing and the Board of Nursing in the party state where she wishes to work. Any requests for out of state employment should be directed, in writing, to the Executive Director of the Board.
 - 4. Ms. Allison shall maintain a course of conduct in her capacity as a practical nurse

commensurate with the requirements of § 54.1-3000 et seq. of the Code and the Board of Nursing Regulations.

Pursuant to § 54.1-2400.2 of the Code, the signed original of this Order shall remain in the custody of the Department of Health Professions as a public record, and shall be made available for public inspection and copying upon request.

Pursuant to Section 54.1-2400(10) of the Code, Ms. Allison may, not later than 5:00 p.m., on **January 21, 2013,** notify Jay P. Douglas, R.N., M.S.M., C.S.A.C., Executive Director, Board of Nursing, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233, in writing that she desires a formal administrative hearing before the Board. Upon the filing with the Executive Director of a request for the hearing, this Order shall be vacated.

FOR THE BOARD:

Jay P. Douglas, R.N., M.S.M., C.S.A.C.

Executive Director

Virginia Board of Nursing

ENTERED: Alexander 18, 2012

This Order shall become final on January 21, 2013, unless a request for a formal administrative hearing is received as described above.