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VA BD OF NURSING



Certified True Copy

By *[Signature]*
Virginia Board of Nursing

COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367-4400
FAX (804) 527-4475

May 29, 2015

Lynnette Stevens Anderson
1881 A Briarcliff Circle
Atlanta, GA 30329

CERTIFIED MAIL

DUPLICATE COPY
VIA FIRST CLASS MAIL

RE: License No.: 0001-237410

DATE 5/29/15

Dear Ms. Anderson:

Pursuant to Section 54.1-2409 of the Code of Virginia (1950), as amended, ("Code"), you are hereby given notice that your license to practice nursing in the Commonwealth of Virginia has been mandatorily suspended by the enclosed Order entered May 29, 2015. You are hereby advised that, pursuant to Section 54.1-2409.1 of the Code, any person who practices a profession or occupation after having their license or certificate to do so suspended shall be guilty of a felony. Please return your license to Jay P. Douglas, Executive Director of the Virginia Board of Nursing, at the above address, immediately upon receipt of this letter.

Section 54.1-2409 of the Code further provides that you may apply to the Board of Nursing ("Board") for reinstatement of your license, and shall be entitled to a hearing not later than the next regular meeting of the Board after the expiration of sixty days from the receipt of such reinstatement application. You have the following rights, among others: to be represented by legal counsel, to have witnesses subpoenaed on your behalf, to present documentary evidence and to cross-examine adverse witnesses. The reinstatement of your license shall require the affirmative vote of three-fourths of the members present of the Board of Nursing.

Should you wish to petition the Board of Nursing for reinstatement of your license, contact Jay P. Douglas, Executive Director, at the above address or (804) 367-4599.

Sincerely,

David E. Brown, D.C., Director
Department of Health Professions

Enclosures
Case # 163176

VIRGINIA:

BEFORE THE DEPARTMENT OF HEALTH PROFESSIONS

**IN RE: LYNNETTE STEVENS ANDERSON, R.N.
 License No.: 0001-237410**

ORDER

In accordance with Section 54.1-2409 of the Code of Virginia (1950), as amended, ("Code"), I, David E. Brown, D.C., Director of the Virginia Department of Health Professions, received and acted upon evidence that the Michigan Board of Nursing accepted the voluntary surrender, in lieu of further disciplinary action, from Lynnette Stevens Anderson, R.N., of her license to practice nursing in the State of Michigan by a Consent Order and Stipulation dated January 8, 2015. A certified copy of the Consent Order and Stipulation is attached to this Order and is marked as Commonwealth's Exhibit No. 1.

WHEREFORE, by the authority vested in the Director of the Department of Health Professions pursuant to Section 54.1-2409 of the Code, it is hereby ORDERED that the license of Lynnette Stevens Anderson, R.N., to practice nursing in the Commonwealth of Virginia be, and hereby is, SUSPENDED.

Upon entry of this Order, the license of Lynnette Stevens Anderson, R.N., will be recorded as suspended. Should Ms. Anderson seek reinstatement of her license pursuant to Section 54.1-2409 of the Code, she shall be responsible for any fees that may be required for the reinstatement and renewal of her license prior to issuance of her license to resume practice.

Pursuant to Sections 2.2-4023 and 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.



David E. Brown, D.C., Director
Department of Health Professions

ENTERED: 5/29/15



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367-4400
FAX (804) 527-4475

CERTIFICATION OF DUPLICATE RECORDS

I, David E. Brown, D.C., Director of the Department of Health Professions, hereby certify that the attached Consent Order and Stipulation dated on January 8, 2015, regarding Lynnette Stevens Anderson, R.N., is a true copy of the records received from the State of Michigan Board of Nursing.

David E. Brown, D.C.

Date: 5/29/15

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF HEALTH CARE SERVICES
BOARD OF NURSING
DISCIPLINARY SUBCOMMITTEE

In the Matter of

LYNNETTE STEVENS, R.N.
License No. 47-04-294728

Complaint No. 47-13-181747

CONSENT ORDER AND STIPULATION

CONSENT ORDER

An administrative complaint was filed with the Disciplinary Subcommittee of the Board of Nursing on May 20, 2014, charging Lynnette Stevens, R.N., (Respondent), with having violated sections 16221(b)(x), (i), and 16222(3) of the Public Health Code, 1978 PA 368, as amended, MCL 333.1101 *et seq.*

The parties have stipulated that the Disciplinary Subcommittee may enter this consent order. The Disciplinary Subcommittee has reviewed the stipulation contained in this document and agrees that the public interest is best served by resolution of the outstanding complaint. Therefore, the Disciplinary Subcommittee finds that the allegations of fact contained in the complaint are true and that Respondent has violated sections 16221(b)(x), (i), and 16222(3) of the Public Health Code.

Accordingly, for these violations, IT IS ORDERED:



STATE OF MICHIGAN - INGHAM COUNTY
We certify that the foregoing is a true copy of
the original on file in the office of the
Department of Licensing & Regulatory Affairs
Bureau of Health Care Services

Respondent shall PERMANENTLY SURRENDER her license to the Department within sixty (60) days of the effective date of this order. The license shall not be renewed, reinstated, reissued, or reactivated, limited or otherwise, at any future date.

Respondent shall direct any communications to the Department that are required by the terms of this order to: Sanction Monitoring, Bureau of Health Care Services, Enforcement Division, Department of Licensing and Regulatory Affairs, P.O. Box 30670, Lansing, Michigan 48909.

Respondent shall be responsible for all costs and expenses incurred in complying with the terms and conditions of this consent order.

Respondent shall be responsible for the timely compliance with the terms of this consent order, including the timely filing of any documentation. Failure to comply within the time limitations provided will constitute a violation of this order.

If Respondent violates any term or condition set forth in this order, Respondent will be in violation of 1996 AACRS, R 338.1632, and section 16221(h) of the Public Health Code.

This order shall be effective thirty (30) days from the date signed by the Chairperson of the Disciplinary Subcommittee or the Disciplinary Subcommittee's authorized representative, as set forth below.

STATE OF MICHIGAN - INGHAM COUNTY
We certify that the foregoing is a true copy of
the original on file in the office of the
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Bureau of Health Care Services

Signed on _____

1/8/15

MICHIGAN BOARD OF NURSING

By _____

Chairperson, Disciplinary Subcommittee

STIPULATION

The parties stipulate as follows:

1. The facts alleged in the complaint are true and constitute a violation of the Public Health Code.
2. Respondent understands and intends that, by signing this stipulation, she is waiving the right under the Public Health Code, rules promulgated under the Public Health Code, and the Administrative Procedures Act of 1969, 1969 PA 306, as amended, MCL 24.201 *et seq.*, to require the Department to prove the charges set forth in the complaint by presentation of evidence and legal authority, and to present a defense to the charges before the Disciplinary Subcommittee or its authorized representative. Should the Disciplinary Subcommittee reject the proposed consent order, the parties reserve the right to proceed to hearing.
3. The Disciplinary Subcommittee may enter the above Consent Order, supported by Board conferee Cindy Fenske, R.N., D.N.P., C.N.E. Ms. Fenske or an

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attorney from the Licensing and Regulation Division may discuss this matter with the Disciplinary Subcommittee in order to recommend acceptance of this resolution.

4. Ms. Fenske and the parties considered the following factors in reaching this agreement:


A. Ms. Stevens's primary residence and place of employment are located in the State of Georgia. However, she maintains a nursing license in over forty states. This multi-state licensure allows her to telephonically provide healthcare instruction to individuals located outside Georgia.

B. Ms. Stevens does not actively practice in Michigan at present and does not intend to return to the state to practice in the future. Accordingly, she does not wish to continue attending to the requirements necessary to keep her Michigan license current and unencumbered.


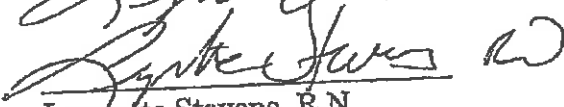
C. The Indiana State Board of Nursing's decision to deny the renewal of Ms. Stevens's nursing license was not the result of any practice-related failure on Ms. Stevens's part. Rather, Indiana's adverse action was based on Ms. Stevens's failure to respond to the Board's request for additional information concerning a domestic dispute that resulted in her arrest. Ms. Stevens was never charged in connection with this arrest, and the arrest record has been restricted.

By signing this stipulation, the parties confirm that they have read, understand and agree with the terms of the consent order.

AGREED TO BY:


Nate Knapper (P77149)
Assistant Attorney General
Attorney for Complainant
Dated: 11/17/14

AGREED TO BY:



Lynette Stevens, R.N.
Respondent

Dated: 11/5/2014

LF 2014-0086843-A/Stevens, Lynette, R.N., 131747/0001168790SG45/p.COS

STATE OF MICHIGAN - INGHAM COUNTY
We certify that the foregoing is a true copy of
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Bureau of Health Care Services

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF HEALTH CARE SERVICES
BOARD OF NURSING
DISCIPLINARY SUBCOMMITTEE

In the Matter of

LYNNETTE STEVENS, R.N.
License Number: 47-04-294728

File Number: 47-13-131747

ADMINISTRATIVE COMPLAINT

The Michigan Department of Licensing and Regulatory Affairs, hereafter Complainant, by Carole H. Engle, Director, Bureau of Health Care Services, files this Complaint against Lynnette Stevens, R.N., hereafter Respondent, as follows:

1. The Michigan Board of Nursing, hereafter Board, is an administrative agency established by the Public Health Code, 1978 PA 368, as amended; MCL 333.1101 et seq. Pursuant to section 16226 of the Public Health Code, supra, the Board's Disciplinary Subcommittee is empowered to discipline licensees for violations of the Public Health Code.

2. Respondent is currently licensed to practice as a registered nurse in the state of Michigan and has an address of record with Complainant of Ellenwood, Georgia.

3. On December 18, 2013, the Indiana Board of Nursing, hereafter Indiana Board, signed a letter that denied Respondent's licensure renewal application.

was based on Respondent's failure to respond to the Indiana Board's request to present additional information. A copy of the Indiana Board's disciplinary document, marked Exhibit A, is attached and incorporated.

4. Respondent failed to notify Complainant of the adverse action taken by the Indiana Board within 30 days of the date of the action.

COUNT I

The adverse action taken by the Indiana Board of Nursing, as set forth above in paragraph 3, constitutes a final adverse administrative action by a licensure, registration, disciplinary, or certification board involving the holder of, or an applicant for, a license or registration regulated by another state or a territory of the United States, in violation of section 16221(b)(x) of the Public Health Code, supra

COUNT II

Respondent's conduct, as set forth in paragraph 4, evidences a failure to notify Complainant of the adverse action taken by the Indiana Board of Nursing, as required by section 16222(3) of the Public Health Code, supra, in violation of section 16221(i) of the Public Health Code, supra.

The Complaint is based upon files and records maintained by Complainant and the attached Affidavit of Bilal Allateef.

Complainant requests that this Complaint be served upon Respondent and that Respondent be offered an opportunity to show compliance with all lawful requirements for retention of the license. If compliance is not shown, Complainant further requests that formal proceedings be commenced pursuant to the Public Health Code, rules promulgated thereunder, and the Administrative Procedures Act of 1969, 1969 PA 306, as amended; MCL 24.201 et seq.

Pursuant to section 16231(7) of the Public Health Code, supra, Respondent has 30 days from the date of receipt of this Complaint to submit a written response to the allegations contained herein. The written response shall be submitted to Complainant, Carole H Engle, Director, Bureau of Health Care Services, Department of Licensing and Regulatory Affairs, P.O. Box 30670, Lansing, MI 48909.

Pursuant to section 16231(8) of the Public Health Code, supra, Respondent's failure to submit a written response within 30 days, as noted above shall be treated as an admission of the allegations contained herein and shall result in transmittal of this Complaint directly to the Board's Disciplinary Subcommittee for imposition of an appropriate sanction.

DATED:

5-20-14



Carole H. Engle, Director
Bureau of Health Care Services

Attachments

This is the final page of an Administrative Complaint in the matter of Lynnette Stevens, R.N., File Number 47-13-131747, before the Disciplinary Subcommittee of the Michigan Board of Nursing, consisting of three pages, this page included.

WH



**Indiana
Professional
Licensing
Agency**

Indiana State Board of Nursing
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Phone: (317) 234-2043
Website: PLA.IN.gov

Michael R. Pence, Governor

Nicholas W. Rhoad, Executive Director

December 18, 2013

Lynnette Stevens
1881 Apt A. Briarcliff Circle
Atlanta, GA 30329

Dear Ms Stevens:

Representatives from the Indiana State Board of Nursing reviewed your application for renewal of licensure at their meeting held on December 12, 2013. Your appearance was requested before the Board to discuss in more detail the Board's concerns regarding approval of your application for renewal of licensure. You failed to appear or respond to the Board's request for additional information; therefore, your request was denied.

You have the right to petition for review of this decision under IC § 4-21.5-3-7. The petition must be in writing and must state facts identifying the reasons for review and demonstrating that you have been aggrieved or adversely affected by the Board's decision.

According to law, the petition for review must be filed with the Board within eighteen (18) days from the date of this letter unless such date is a Saturday, Sunday, legal holiday under state statute or day that the Indiana Professional Licensing Agency is closed during regular business hours, in which case the deadline would be the first day thereafter that is not a Saturday, Sunday, legal holiday under state statute, or day that the Indiana Professional Licensing Agency is closed during regular business hours.

If your petition for review is filed timely and review is granted, you will receive notification of an administrative hearing. You or your representative must be present at that hearing. You have the right to be represented by an attorney at your own expense. A deputy attorney general may be present to represent the State of Indiana. As petitioner, you will have the burden of proving that the Board's decision is incorrect.

If you have any questions, please do not hesitate to contact the Indiana State Board of Nursing at (317) 234-2043, via fax at (317) 233-4236 or via e-mail at cburke@pla.in.gov.

Sincerely,

Carri Burke,
Compliance Director
Indiana State Board of Nursing

STATE OF MICHIGAN - INGHAM COUNTY
We certify that the foregoing is a true copy of
the original on file in the office of the
Department of Licensing & Regulatory Affairs
Bureau of Health Care Services

EXHIBIT

A page 1 of 1

STATE OF MICHIGAN
DEPARTMENT OF LICENSING & REGULATORY AFFAIRS
BUREAU OF HEALTH CARE SERVICES
BOARD OF NURSING
DISCIPLINARY SUBCOMMITTEE

In the Matter of

LYNNETTE STEVENS, R.N.
License Number: 47-04-294728

File Number: 47-13-131747

STATE OF MICHIGAN)
) ss
COUNTY OF INGHAM)

AFFIDAVIT OF BILAL ALLATEEF

NOW COMES Bilal Allateef, hereafter Affiant, who, after first being duly sworn and upon oath, states on information and belief as follows:

Affiant is a Departmental Analyst in the Enforcement Division, Bureau of Health Care Services, Department of Licensing & Regulatory Affairs, hereafter Department, and in this capacity is responsible for obtaining certified copies of records of final adverse administrative actions taken by other states against health professionals licensed to practice a health profession in the state of Michigan.

On February 27, 2014, Affiant received certified records of final adverse administrative action indicating that Lynnette Stevens, R.N., hereafter Respondent, had been disciplined in the state of Indiana pursuant to a letter, dated December 18, 2013.

Upon checking the Department's records relative to Michigan licensure, Affiant learned that Respondent is currently licensed to practice as a Registered Nurse in the state of Michigan.

Affiant has not been notified by Respondent of the December 18, 2013, adverse action in the state of Indiana, within 30 days of the date of the action.

Further Affiant saith not.

Bilal Allateef
Bilal Allateef

Subscribed and sworn to before me
this 21st day of March, 2014

Bianka A. Daly
Bianka A. Daly, Notary Public
County of Ingham
My commission expires July 8, 2014.

BIANKA A. DALY
NOTARY PUBLIC-STATE OF MICHIGAN
COUNTY OF INGHAM
My Commission Expires July 8, 2014

This is the last and final page of an Affidavit of Bilal Allateef in the matter of Lynnette Stevens, R.N., File Number 47-13-131747, before the Disciplinary Subcommittee of the Michigan Board of Nursing, consisting of two pages, this page included