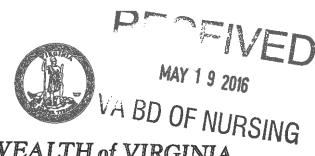
Certified True Copy



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 16, 2016

Marie Louise Joy Clarke 4109 SW 16<sup>th</sup> Terrace Miami, FL 33134

RE: License No.: 0001-148868

CERTIFIED MAIL
DUPLICATE COPY
VIA FIRST CLASS MAIL

DATE SILLIS

Dear Ms. Clarke:

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 16, 2016. 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, the application may be obtained at <a href="www.dhp.virginia.gov">www.dhp.virginia.gov</a>.

Sincerely,

Lisa R. Hahn, M.P.A., Chief Deputy Director Department of Health Professions

Loa R.Hah

Enclosures Case # 171977 VIRGINIA:

BEFORE THE DEPARTMENT OF HEALTH PROFESSIONS

IN RE:

MARIE LOUISE JOY CLARKE, R.N.

License No.: 0001-148868

**ORDER** 

In accordance with Section 54.1-2409 of the Code of Virginia (1950), as amended, ("Code"), I,

Lisa R. Hahn, M.P.A., Chief Deputy Director of the Virginia Department of Health Professions,

received and acted upon evidence that the Florida Board of Nursing accepted the voluntary surrender, in

lieu of further disciplinary action, from Marie Louise Joy Clarke, R.N., of her license to practice nursing

in the State of Florida by a Final Order dated April 18, 2016. A certified copy of the Final Order 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 privilege of Marie Louise

Joy Clarke, R.N., to renew her license to practice nursing in the Commonwealth of Virginia be, and

hereby is, SUSPENDED.

Upon entry of this Order, the license of Marie Louise Joy Clarke, R.N., will be recorded as

suspended. Should Ms. Clarke 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.

Lisa R. Hahn, M.P.A., Chief Deputy Director

Department of Health Professions

ENTERED: May 14, 2016



# 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, Lisa R. Hahn, M.P.A., Chief Deputy Director of the Department of Health Professions, hereby certify that the attached Final Order dated April 18, 2016, regarding Marie Louise Joy Clarke, R.N., is a true copy of the records received from the State of Florida Board of Nursing.

Lisa R. Hahn, M.P.A.

Date: May 16, 2016

STATE OF FLORIDA BOARD OF NURSING FILED DATE - APR 1 9 2016

Department of Haskin

By:

DEPARTMENT OF HEALTH,

Petitioner,

Vs.

Case No.: 2015-27959 License No.: RN 3384112

MARIE L. JOY.

Respondent.

#### FINAL ORDER

THIS CAUSE came before the BOARD OF NURSING (Board) pursuant to Sections 120.569 and 120.57(4), Florida Statutes, on April 7, 2016, in Lake Buena Vista, Florida, for consideration of Respondent's voluntary relinquishment (attached hereto as Exhibit A). Upon consideration of the voluntary relinquishment, the documents submitted in support thereof, the arguments of the parties, and being otherwise fully advised in the premises, it is hereby

ORDERED AND ADJUDGED that the voluntary relinquishment is accepted as a resolution of this case.

This Final Order shall take effect upon being filed with the Clerk of the Department of Health.

Case No. 2015-27959

COMMONWEALTH'S
EXHIBIT

DONE AND ORDERED this /8 day of \_\_\_\_\_\_

BOARD OF NURSING

Joe R. B.ker, Jr.
Executive Director for
Jody Bryant Newman, EdD, EdS
Chair

### CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Final Order has been provided by U.S. Mail to MARIE L. JOY, 4109 SW 16<sup>th</sup> Terrace, Miami, Florida 33134; and by email to Dept. of Health - PSU, at Matthew.Witters@flhealth.gov and by email to Lee Ann Gustafson, Senior Assistant Attorney General, at LeeAnn.Gustafson@myfloridalegal.com this 19<sup>th</sup> day of 2016.

Brogal Sardus

**Reporty Agency Clark** 

Bates Number: 46325

FILED
DEPARTMENT OF HEALTH
DEPUTY CLERK

CLERK: amylarroway

STATE OF FLORIDA
DEPARTMENT OF HEALTH

DATE 2-8-16

**DEPARTMENT OF HEALTH,** 

PETITIONER,

٧,

CASE NO. 2015-27959

MARIE L. JOY, R.N.,

RESPONDENT.

## **VOLUNTARY RELINOUISHMENT OF LICENSE**

Respondent, MARIE L. JOY, R.N., license number 3384112, hereby voluntarily relinquishes Respondent's license to practice nursing in the State of Florida and states as

#### follows:

- 1. Respondent's purpose in executing this Voluntary Relinquishment Is to avoid further administrative action with respect to this case. Respondent understands that acceptance by the Board of Nursing (hereinafter the Board) of this Voluntary Relinquishment shall be construed as disciplinary action against Respondent's license pursuant to Section 456.072(1)(f), Florida Statutes. As with any disciplinary action, this relinquishment will be reported to the National Practitioner's Data Bank. Licensing authorities in other states may impose discipline in their jurisdiction based on discipline taken in Florida.
- 2. Respondent agrees to voluntarily cease practicing nursing immediately upon executing this Voluntary Relinquishment. Respondent further agrees to refrain from the

practice of nursing until such time as this Voluntary Relinquishment is presented to the Board and the Board issues a written Final Order in this matter.

- 3. In order to expedite consideration and resolution of this action by the Board in a public meeting, Respondent, being fully advised of the consequences of so doing, hereby walves the statutory privilege of confidentiality of Section 456.073(10), Florida Statutes, and waives a determination of probable cause, by the Probable Cause Panel, or the Department when appropriate, pursuant to Section 456.073(4), Florida Statutes, regarding the complaint, the investigative report of the Department of Health, and all other information obtained pursuant to the Department's investigation in this case. By signing this waiver, Respondent understands that the record and complaint become public record and remain public record and that information is immediately accessible to the public.
- 4. Upon the Board's acceptance of this Voluntary Relinquishment, Respondent agrees to walve all rights to seek judicial review, or to otherwise challenge or contest the validity of this Voluntary Relinquishment and of the Final Order of the Board incorporating this Voluntary Relinquishment.
- 5. Petitioner and Respondent hereby agree that upon the Board's acceptance of this Voluntary Refinquishment, each party shall bear its own attorney's fees and costs related to the prosecution or defense of this case.
- 6. Respondent authorizes the Board to review and examine all investigative file materials concerning Respondent in connection with the Board's consideration of this

Bates Number: 46327

### PRACTITIONER REGULATES LEGAL

Voluntary in Period List Normannia 2 Respondent agrees that consideration of this Voluntary Relinquishment and other related materials by the Board shall not prejudice or preclude the Board, or any of its members, from further participation, consideration, or resolution of these proceedings if the terms of this Voluntary Relinquishment are not accepted by the Board.

SIGNED this 29 day of music/ 2016

MARTE L. JOY, R.N.

STATE OF FLORIDA  COUNTY OF Michigan Davie L Joy whose identity is known to be by (type of identification), and who under oath,
COUNTY OF THE OF
Before me personally appeared 11 10/19 Union whose identity is known
to be by (type of identification), and who under oath,
acknowledges that his/her signature appears above. Sworn to and subscribed by
Respondent before me this 29 day of January 2016.
AP TO D

Notary Public

My Commission Expires:

Sept 15, 2018

NST/tir