

**STATE OF FLORIDA
BOARD OF NURSING**

BOARD: Nursing

CASE NUMBER: 2014-18419

COMPLAINT MADE BY: Department of Health
Consumer Services Unit

DATE OF COMPLAINT: November 3, 2015

RESPONDENT: Joleen Kennedy, C.N.A.
P.O. Box 11005
St. Petersburg, Florida 33733

ALTERNATE ADDRESS: 401 34th Street North, #104
Saint Petersburg, Florida 33714

RESPONDENT'S ATTORNEY: N/A

INVESTIGATED BY: Diane Bates
Tallahassee Office

REVIEWED BY: Natalia S. Thomas
Assistant General Counsel

RECOMMENDATION: Dismiss (4097)
Reconsideration

CLOSING ORDER ON RECONSIDERATION

THE COMPLAINT: The Complainant alleged Subject violated Section 464.204(1)(b), Florida Statutes (2014), intentionally violating any provision of this chapter, chapter 456, or the rules adopted by the board, by intentionally violating Section 456.072(1)(c), Florida Statutes (2014), being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless

of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession.

THE FACTS: On or about January 26, 2016, the Department filed an Administrative Complaint alleging that Subject was convicted of a crime related to the practice of nursing assistance. On or about April 8, 2016, the Board of Nursing revoked Subject's license to practice as a certified nursing assistant in case number 2014-18335. As such, Subject no longer has a license to practice nursing assistance in the state of Florida.

Since Respondent no longer possesses a license to practice nursing assistance in the state of Florida, the Department recommends that this case be closed without further prosecution.

THE LAW: Pursuant to Section 456.073(2), Florida Statutes, this case is hereby DISMISSED.

It is, therefore, ORDERED that this matter should be and the same is hereby DISMISSED.

DONE and ORDERED this _____ day of _____, 2016.

CHAIRPERSON, PROBABLE CAUSE PANEL
BOARD OF NURSING

/NST

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN R. KENNEDY, C.N.A.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Joleen R. Kennedy, C.N.A., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing assistance pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Administrative Complaint, Respondent was a certified nursing assistant (C.N.A.) within the State of Florida, having been issued certification number CNA 81172.

3. Respondent is licensed pursuant to Chapter 464, Florida Statutes, and is a health care practitioner as defined in Section 456.001(4), Florida Statutes.

4. Respondent's address of record is P.O. Box 11005, St. Petersburg, Florida, 33733.

5. Respondent's alternate address is 401 34th Street, North, #104, St. Petersburg, Florida, 33714.

6. Respondent's address may also be 1616 21st Street, South, Lot 220, St. Petersburg, Florida, 33712.

7. On or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes.

8. A certified nursing assistant is one of a handful of categories of licensed professionals that provides direct patient care, in many instances, to minors, the elderly or those with long-term infirmities, often in patients' homes or in nursing home settings with access to patients' valuables. As such, entering a plea of nolo contendere to petit theft, relates to the practice

of, or the ability to practice, nursing assistance and violates the level of trust and confidence invested by the Legislature in these categories of licensees.

9. Section 464.204(1)(b), Florida Statutes (2014), provides that intentionally violating any provision of Chapter 464, Chapter 456, or the rules adopted by the board, constitutes grounds for which the board may impose disciplinary sanctions.

10. Section 456.072(1)(c), Florida Statutes (2014), provides that being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession, constitutes grounds for disciplinary action.

11. As set forth above, on or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes, which relates to the Respondent's profession.

12. Based on the foregoing, Respondent violated Section 464.204(1)(b), Florida Statutes (2014), by intentionally violating Section

456.072(1)(c), Florida Statutes (2014), for being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 27th day of January, 2016.

JOHN H. ARMSTRONG, MD, FACS
State Surgeon General and Secretary of Health

N. Thomas

Natalia S. Thomas
Assistant General Counsel
Florida Bar Number 83826
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Telephone: (850) 245-4444 ext. 8218
Facsimile: (850) 245-4662
Email: natalia.thomas@flhealth.gov

/NST

PCP: *January 26, 2016*
PCP Members: *Gordon & Kemp*

FILED
Department Of Health
Deputy Clerk
CLERK *Angel Sanders*
DATE **JAN 28 2016**

NOTICE OF RIGHTS

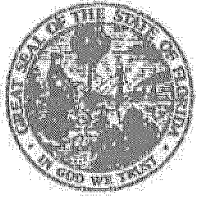
Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.



STATE OF FLORIDA

DEPARTMENT OF HEALTH



INVESTIGATIVE REPORT

Office: ISU – St. Petersburg	Date of Complaint: 03/04/16	Case Number: 201418419
Subject: JOLEN KENNEDY, CNA 1616 – 21 st Street South, Lot 220 St. Petersburg, FL, 33712 Cell Phone 727-310-9915 *New*	Source: PSU	
Profession: Nursing	License Number and Status: CNA81172 Delinquent / Active	
Related Case(s): None	Period of Investigation and Type of Report: 03/04/16 through 03/08/16	
Alleged Violation: See Final Report		
<p>Synopsis: This investigation is predicated upon a request from PSU for hand service of an Administrative Complaint and other related documents to KENNEDY. Extensive research was conducted and contact was made with the property owner at 1616 – 21st Street South, Lot 220, St. Petersburg. This mobile home owner stated that her son (Jason Piner) had allowed KENNEDY to reside there until the owner removed her in August 2015. She stated KENNEDY is residing in various motels in the St. Petersburg area. This investigator was able to locate KENNEDY at the Quality Inn Suites Room 259 located at 3655 Hospitality Lane, Clearwater, FL. KENNEDY was served at 5:30 PM on 03/07/16 at her room in the presence of the motel managers.</p> <p>Any attempt to locate KENNEDY in the St. Petersburg area would be futile. This investigator would suggest to attempt contact with her boyfriend (Jason Piner) at 727-564-1256 as to the current whereabouts of KENNEDY. KENNEDY failed to return any phone messages that were left by this investigator.</p>		
Exhibit S1-1	PSU Request	Page 2
Exhibit S1-2	Administrative Complaint and related paperwork	Page 3-18
Exhibit S1-3	Affidavit of Service	Page 19
Investigator/Date: Joel Pilcher, ISII, PI-49	03/08/16	Approved By/Date: Rob Seimetz, Investigator Supervisor PI-58
Distribution: HQ/ISU		03/08/16

Mission:

To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.



Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

PSU REQUEST FORM

FROM: Tracie Robinson, for Natalia Thomas Esq.	TO: ISU Shane Walters, Mgr.
Date: 3/4/216	TO: CSU
Phone #: 850-245-4444, ext. 8218	CC: Diane Bates, Inv.

Case Number: 2014-18419	Board: Nursing	Status: 87
Subject: Jolen Kennedy, C.N.A.	HL Code: HLL118B	
Requested Completion Date: 4/1/2016		

(PSU) TYPE OF REQUEST: (describe details below)

Process Service* (Activity Code 160)

Additional Information Requested (Activity Code 145)

Deficiency in Investigative Work (Activity Code 150)

Details: 1) Please attempt hand service on Subject of the Administrative Complaint and Election of Rights at the address of record listed below. Thank you for your time.

*The following additional information is needed for each service request:

Last Known Address 401 34th Street, North, #104th, St. Petersburg, FL 33714 & 1616 21st Street, North, Lot #220, St. Petersburg, FL 33712 Last Known Name & Phone Number:

Last Known Place of Employment & Address if Known:

Has Contact Been Made With This Individual? YES No ; If Yes, When?

Was this case originally worked by CSU or in an area office different from where this service request is being sent? YES ** No NOTE: All process service requests need to be sent to appropriate field office.

**IF YES, please send a copy of the original Investigative Report without attachments.

(ISU/CSU) RESPONSE:

Process Service Completed (Activity Code 161) Process Service NOT Completed (Activity Code 162)

Additional Info Sent to Legal (Activity Code 156)

Supp. Investigation Request Cancelled (Activity Code 157)

Email to:

<u>Pensacol</u>	<u>Tallahass</u>	<u>Alach</u>	<u>Jacksonvi</u>	<u>St.</u>	<u>Tamp</u>	<u>Orland</u>	<u>Ft.</u>	<u>West</u>	<u>Ft.</u>	<u>Miam</u>
<u>a</u>	<u>ee</u>	<u>ua</u>	<u>lle</u>	<u>Pete</u>	<u>a</u>	<u>o</u>	<u>Myers</u>	<u>Palm</u>	<u>Lauderdale</u>	<u>i</u>
	<u>Consume</u>									
	<u>r</u>									
	<u>Services</u>	<u>ULA</u>								

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Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

February 2, 2016

Certified Article Number

9414 7266 9904 2017 4876 88

SENDERS RECORD

Joleen Kennedy
1616 21st Street South
Lot 220
St. Petersburg, Florida 33712

RE: DOH v. Joleen Kennedy, C.N.A.
Case No. 2014-18419

Dear Ms. Kennedy:

Enclosed please find a copy of an Administrative Complaint that has been filed against your license by the Department of Health. An Election of Rights form is also enclosed.

Please review the attached documents and return the Election of Rights form to my attention. You must return your election to my office within twenty-one (21) days of the date you received it. Failure to return your election within twenty-one (21) days will be considered a waiver of your right to dispute the facts alleged in the Administrative Complaint.

In addition, enclosed is a Settlement Agreement containing terms I believe will be acceptable in resolving this matter without the need for a Formal or Informal Hearing. If you would like to accept the terms of the Settlement Agreement, please sign it before a notary public and return it to my office. Please note that the Settlement Agreement is subject to final approval by the Board of Nursing and is considered disciplinary action.

A Voluntary Relinquishment form has also been included in this package for your consideration. Voluntarily relinquishing your license is giving up your ability to practice Nursing in the state of Florida. If you no longer wish to practice Nursing in Florida, please sign the voluntary relinquishment before a notary and return it to my office. Please note that voluntary relinquishment of your license is considered disciplinary action.

Please contact me by phone at 850-245-4444, extension 8218, if you have any questions.

Sincerely,

Natalia S. Thomas
Assistant General Counsel
(850) 245-4444 Ext. 8218

Enclosures: Administrative Complaint, Election of Rights form, Settlement Agreement, and Voluntary Relinquishment form

Florida Department of Health
Office of the General Counsel – Prosecution Services Unit
4052 Bald Cypress Way, Bln C-65 • Tallahassee, FL 32399-3265
PHONE: 850/245-4444 • FAX 850/245-4662

www.FloridaHealth.gov
TWITTER: HealthyFLA
FACEBOOK: FLDepartmentofHealth
YOUTUBE: fldoh
FLICKR: HealthyFla
PINTEREST: HealthyFla

Exhibit S1-2

000003

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN R. KENNEDY, C.N.A.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Joleen R. Kennedy, C.N.A., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing assistance pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.
2. At all times material to this Administrative Complaint, Respondent was a certified nursing assistant (C.N.A.) within the State of Florida, having been issued certification number CNA 81172.

3. Respondent is licensed pursuant to Chapter 464, Florida Statutes, and is a health care practitioner as defined in Section 456.001(4), Florida Statutes.

4. Respondent's address of record is P.O. Box 11005, St. Petersburg, Florida, 33733.

5. Respondent's alternate address is 401 34th Street, North, #104, St. Petersburg, Florida, 33714.

6. Respondent's address may also be 1616 21st Street, South, Lot 220, St. Petersburg, Florida, 33712.

7. On or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes.

8. A certified nursing assistant is one of a handful of categories of licensed professionals that provides direct patient care, in many instances, to minors, the elderly or those with long-term infirmities, often in patients' homes or in nursing home settings with access to patients' valuables. As such, entering a plea of nolo contendere to petit theft, relates to the practice

of, or the ability to practice, nursing assistance and violates the level of trust and confidence invested by the Legislature in these categories of licensees.

9. Section 464.204(1)(b), Florida Statutes (2014), provides that intentionally violating any provision of Chapter 464, Chapter 456, or the rules adopted by the board, constitutes grounds for which the board may impose disciplinary sanctions.

10. Section 456.072(1)(c), Florida Statutes (2014), provides that being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession, constitutes grounds for disciplinary action.

11. As set forth above, on or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes, which relates to the Respondent's profession.

12. Based on the foregoing, Respondent violated Section 464.204(1)(b), Florida Statutes (2014), by intentionally violating Section

3

Department of Health v. Joleen R. Kennedy, C.N.A.
Case Number: 2014-18419

456.072(1)(c), Florida Statutes (2014), for being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 27th day of January, 2016.

JOHN H. ARMSTRONG, MD, FACS
State Surgeon General and Secretary of Health

N. Thomas

Natalia S. Thomas
Assistant General Counsel
Florida Bar Number 83826
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Telephone: (850) 245-4444 ext. 8218
Facsimile: (850) 245-4662
Email: natalia.thomas@flhealth.gov

/NST

PCP: *January 26, 2016*
PCP Members: *Gordon & Kemp*

FILED
Department Of Health
Deputy Clerk
CLERK *Angel Sanders*
DATE JAN 28 2016

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

ELECTION OF RIGHTS

Please sign and complete all of the information below:

I received the Administrative Complaint on the following date: _____

PLEASE SELECT ONLY 1 OF THE 2 OPTIONS.

OPTION 1. _____ I do not dispute the allegations of material fact in the Administrative Complaint. I request a hearing be conducted pursuant to Section 120.57(2), Florida Statutes, where I will be permitted to appear, if I so choose, and submit oral and/or written evidence in mitigation of the complaint to the Board.

OPTION 2. _____ I do dispute the allegations of material fact contained in the Administrative Complaint and request this to be considered a petition for formal hearing, pursuant to Sections 120.569(2)(a) and 120.57(1), Florida Statutes, before an Administrative Law Judge appointed by the Division of Administrative Hearings. Pursuant to the requirement of Uniform Rule 28-106.2015(5), Florida Administrative Code, I specifically dispute the following material facts (identified by paragraph number and fact disputed) in the Administrative Complaint:

In the event that you fail to make an election in this matter within twenty-one (21) days from receipt of the Administrative Complaint, your failure to do so may be considered a waiver of your right to elect a hearing in this matter, pursuant to Rule 28-106.111(4), Florida Administrative Code, and the Board may proceed to hear your case.

PLEASE NOTE: Regardless of which option you choose, you may be able to reach a settlement agreement with the Department in your case. Please contact the prosecuting attorney if you wish to do so.

Respondent's Signature _____
Address: _____

Lic. No.: _____
Phone No.: _____ Fax No.: _____
Email: _____

STATE OF FLORIDA
COUNTY OF _____

Attorney/Qualified Representative* _____
Address: _____

Phone No.: _____
Fax No.: _____
Email: _____

*Qualified Representatives must file written requests to appear as such pursuant to Rule 28-106.106, Uniform Rules of Procedure.

Before me, personally appeared _____, whose identity is known to me or produced _____ (type of identification) and who, acknowledges that his/her signature appears above. Sworn to or affirmed by Affiant before me this _____ day of _____ 20____.

Notary Public-State of Florida

My Commission Expires _____

Type or Print Name _____

PLEASE MAIL AND/OR FAX COMPLETED FORM TO: Natalia S. Thomas, Assistant General Counsel, DOH, Prosecution Services Unit, 4052 Bald Cypress Way, Bin C-65, Tallahassee, Florida 32399-3265. Telephone Number: (850) 245-4444 ext. [8218]; FAX (850) 245-4662; TDD 1-800-955-8771

STATE OF FLORIDA
DEPARTMENT OF HEALTH

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

SETTLEMENT AGREEMENT

Pursuant to Section 120.57(4), Florida Statutes, the above named parties hereby offer this Settlement Agreement (Agreement) and agree to entry of a Final Order of the Board of Nursing (Board) incorporating this Agreement as disposition of the Administrative Complaint, in lieu of any other administrative proceedings. The terms herein become effective only if and when a Final Order accepting this Agreement is issued by the Board and filed with the Department of Health Agency Clerk.

In considering this Agreement, the Board may review all materials gathered during the investigation of this case. If this Agreement is rejected, it, and its presentation to the Board, shall not be used against either party.

STIPULATED FACTS

1. At all times material to this matter, Respondent was a **Certified Nursing Assistant (C.N.A.)** in the State of Florida holding license number **81172**.
2. The Department charged Respondent with an Administrative Complaint that was properly served upon Respondent with violations of Chapters 456 and/or 464,

Florida Statutes. A true and correct copy of the Administrative Complaint is attached hereto and incorporated by reference as Exhibit A.

3. Respondent neither admits nor denies the factual allegations contained in the Administrative Complaint.

STIPULATED LAW

1. Respondent admits that he/she is subject to the provisions of Chapters 456 and 464, Florida Statutes, and the jurisdiction of the Department and the Board.

2. Respondent admits that the stipulated facts, if proven true, constitute violations of Chapter 456 and/or 464, Florida Statutes as alleged in the Administrative Complaint.

3. Respondent agrees that the Agreement is a fair, appropriate, and reasonable resolution of this pending matter.

PROPOSED DISPOSITION

1. The Board of Nursing shall reprimand the license of the Respondent.

2. The Respondent shall pay an administrative fine in the amount of **Fifty dollars (\$50.00)** and investigative costs not to exceed **(One thousand two hundred fifty three dollars and twenty nine cents \$1,253.29)** within **(1 year)** from the date of entry of the Final Order. Payment shall be made to the Board of Nursing and mailed to, DOH/HMQACS, Compliance Management Unit, Bin C76, Post Office Box 6320, Tallahassee, Florida 32314-6320, Attention: Nursing Compliance Officer. Payment must be made by cashier's check or money order ONLY.

Personal checks will **NOT** be accepted.

3. The Respondent shall enroll in and successfully complete courses in **Legal Aspects of Nursing (4-hours)**. This shall be in addition to other normally required continuing education courses. Verification of course content and course completion must be submitted to the Nursing Compliance Officer within six (6) months from the date of the Final Order accepting this Settlement Agreement. The Board will retain jurisdiction for the purpose of enforcing continuing education requirements.

4. The Respondent shall not violate Chapter 456 or 464, Florida Statutes, the rules promulgated pursuant thereto, any other state or federal law, rule, or regulation relating to the practice or the ability to practice nursing. Violation of an order from another state/jurisdiction shall constitute grounds for violation of the Final Order accepting this Settlement Agreement.

5. It is expressly understood that this Settlement Agreement is subject to the approval of the Department and the Board, and has no force and effect until a Final Order is entered accepting this Settlement Agreement.

6. This Settlement Agreement is executed by the Respondent for the purpose of avoiding further administrative action by the Board of Nursing regarding the acts or omissions specifically set forth in the Administrative Complaint attached hereto.

In this regard, Respondent authorizes the Board to review and examine all investigative file materials concerning Respondent prior to, or in conjunction with, consideration of the Agreement. Furthermore, should this Settlement Agreement not be accepted by the Board, it is agreed that presentation to, and consideration of, this Settlement Agreement and other documents and matters by the Board shall not unfairly or illegally

prejudice the Board or any of its members from further participation, consideration or resolution of these proceedings. Respondent shall offer no evidence, testimony or argument that disputes or contravenes any stipulated fact or conclusion of law.

7. Respondent and the Department fully understand that this Settlement Agreement and subsequent Final Order incorporating same will in no way preclude additional proceedings by the Board and/or Department against the Respondent for acts or omissions not specifically set forth in the Administrative Complaint attached hereto.

This Agreement relates solely to the current disciplinary proceedings arising from the above-mentioned Administrative Complaint and does not preclude further action by other divisions, departments, and/or sections of the Department, including but not limited to the Agency for Health Care Administration's Medicaid Program Integrity Office.

8. The Respondent waives the right to seek any attorney's fees or costs from the Department in connection with this disciplinary proceeding.

9. Respondent waives all rights to appeal and further review of this Agreement and these proceedings.

WHEREFORE, the parties hereto request the Board enter a Final Order accepting and implementing the terms of the Settlement Agreement contained herein.

(Signatures follow on next page.)

SIGNED this ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA

COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public

My Commission Expires:

APPROVED this ____ day of _____, 201__.

John H. Armstrong, MD, FACS
State Surgeon General and
Secretary of Health

Natalia S. Thomas
Assistant General Counsel
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, FL 32399-3265
Florida Bar #83826
(850) 245-4444 telephone
(850) 245-4662 facsimile
Email: natalia.thomas@flhealth.gov

NST/tr

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

VOLUNTARY RELINQUISHMENT OF LICENSE

Respondent, **JOLEEN KENNEDY, C.N.A.**, license number **81172**, 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 waives 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 waive 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 Relinquishment, 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 Voluntary Relinquishment. 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 ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA
COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public
My Commission Expires:

NST/tlr

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General & Secretary

Vision: To be the Healthiest State in the Nation

AFFIDAVIT OF SERVICE

DEPARTMENT OF HEALTH

Petitioner

vs

Case No. 2014-18419

JOLEN KENNEDY, CNA

Respondent

COMES NOW, the affiant, who first being duly sworn, deposes and states:

1) Affiant is an Investigator/Inspector employed by the DEPARTMENT OF HEALTH, State of Florida.

2) That on (date) 03/07/16, Affiant made a diligent effort to locate Respondent, to serve _____ Order to Compel an Examination X Administrative Complaint and related papers; _____ Order compelling examination(s); _____ Subpoena(s); _____ Final order; _____ Notice to cease and desist; _____ ESO/ERO and related papers.

3) Check applicable answer below:

X Affiant made personal service on Respondent, or on some person at Respondent's usual place of abode over the age of 15 residing there, on (date) 03/07/16 at (address) Quality Inn Suites Room 259, 3655 Hospitality Lane, Clearwater, FL.

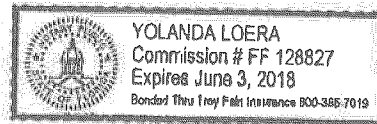
_____ Affiant was unable to make service after searching for Respondent at: (a) all addresses for Respondent shown in the DOH investigation of the case; (b) all official addresses for Respondent shown in his licensing records on the computer terminal or Board office; (c) Local telephone company for the last area Respondent was known to frequent; (d) Division of Drivers Licenses; and (e) Utilities (electric, cable, etc.); any others: _____

Joel Patrick Pilcher PI 79
Affiant

State Of Florida
County Of Pinellas

Before me, personally appeared Joel Patrick Pilcher whose identity is known to me as a co-worker (type of identification) and who, acknowledges that his/her signature appears above.

Sworn to or affirmed by Affiant before me this 8th day of March, 2016.



Notary Public-State of Florida

My Commission Expires

Yolanda Loera
Type or Print Name

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Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General and Secretary

February 2, 2016

Certified Article Number

9414 7266 9904 2017 4882 03

SENDERS RECORD

Joleen Kennedy
P.O. Box 11005
St. Petersburg, FL 33733

RE: DOH v. Joleen Kennedy, C.N.A.
Case No. 2014-18419

Dear Ms. Kennedy:

Enclosed please find a copy of an Administrative Complaint that has been filed against your license by the Department of Health. An Election of Rights form is also enclosed.

Please review the attached documents and return the Election of Rights form to my attention. You must return your election to my office within twenty-one (21) days of the date you received it. Failure to return your election within twenty-one (21) days will be considered a waiver of your right to dispute the facts alleged in the Administrative Complaint.

In addition, enclosed is a Settlement Agreement containing terms I believe will be acceptable in resolving this matter without the need for a Formal or Informal Hearing. If you would like to accept the terms of the Settlement Agreement, please sign it before a notary public and return it to my office. Please note that the Settlement Agreement is subject to final approval by the Board of Nursing and is considered disciplinary action.

A Voluntary Relinquishment form has also been included in this package for your consideration. Voluntarily relinquishing your license is giving up your ability to practice Nursing in the state of Florida. If you no longer wish to practice Nursing in Florida, please sign the voluntary relinquishment before a notary and return it to my office. Please note that voluntary relinquishment of your license is considered disciplinary action.

Please contact me by phone at 850-245-4444, extension 8218, if you have any questions.

Sincerely,

Natalia S. Thomas
Assistant General Counsel
(850) 245-4444 Ext. 8218

Enclosures: Administrative Complaint, Election of Rights form, Settlement Agreement, and Voluntary Relinquishment form

NST/tlr

Florida Department of Health

Office of the General Counsel – Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65 • Tallahassee, FL 32399-3265
PHONE: 850/245-4444 • FAX 850/245-4662

www.FloridaHealth.gov
TWITTER: HealthyFLA
FACEBOOK: FLDepartmentofHealth
YOUTUBE: fldoh
FLICKR: HealthyFla
PINTEREST: HealthyFla

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN R. KENNEDY, C.N.A.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Joleen R. Kennedy, C.N.A., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing assistance pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Administrative Complaint, Respondent was a certified nursing assistant (C.N.A.) within the State of Florida, having been issued certification number CNA 81172.

3. Respondent is licensed pursuant to Chapter 464, Florida Statutes, and is a health care practitioner as defined in Section 456.001(4), Florida Statutes.

4. Respondent's address of record is P.O. Box 11005, St. Petersburg, Florida, 33733.

5. Respondent's alternate address is 401 34th Street, North, #104, St. Petersburg, Florida, 33714.

6. Respondent's address may also be 1616 21st Street, South, Lot 220, St. Petersburg, Florida, 33712.

7. On or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes.

8. A certified nursing assistant is one of a handful of categories of licensed professionals that provides direct patient care, in many instances, to minors, the elderly or those with long-term infirmities, often in patients' homes or in nursing home settings with access to patients' valuables. As such, entering a plea of nolo contendere to petit theft, relates to the practice

of, or the ability to practice, nursing assistance and violates the level of trust and confidence invested by the Legislature in these categories of licensees.

9. Section 464.204(1)(b), Florida Statutes (2014), provides that intentionally violating any provision of Chapter 464, Chapter 456, or the rules adopted by the board, constitutes grounds for which the board may impose disciplinary sanctions.

10. Section 456.072(1)(c), Florida Statutes (2014), provides that being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession, constitutes grounds for disciplinary action.

11. As set forth above, on or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes, which relates to the Respondent's profession.

12. Based on the foregoing, Respondent violated Section 464.204(1)(b), Florida Statutes (2014), by intentionally violating Section

456.072(1)(c), Florida Statutes (2014), for being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 27th day of January, 2016.

JOHN H. ARMSTRONG, MD, FACS
State Surgeon General and Secretary of Health

N. Thomas

Natalia S. Thomas
Assistant General Counsel
Florida Bar Number 83826
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Telephone: (850) 245-4444 ext. 8218
Facsimile: (850) 245-4662
Email: natalia.thomas@flhealth.gov

/NST

PCP: *January 26, 2016*
PCP Members: *Gordon & Kemp*

FILED
Department Of Health
Deputy Clerk
CLERK *Angel Sanders*
DATE **JAN 28 2016**

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

ELECTION OF RIGHTS

Please sign and complete all of the information below:

I received the Administrative Complaint on the following date: _____

PLEASE SELECT ONLY 1 OF THE 2 OPTIONS.

OPTION 1. _____ I do not dispute the allegations of material fact in the Administrative Complaint. I request a hearing be conducted pursuant to Section 120.57(2), Florida Statutes, where I will be permitted to appear, if I so choose, and submit oral and/or written evidence in mitigation of the complaint to the Board.

OPTION 2. _____ I do dispute the allegations of material fact contained in the Administrative Complaint and request this to be considered a petition for formal hearing, pursuant to Sections 120.569(2)(a) and 120.57(1), Florida Statutes, before an Administrative Law Judge appointed by the Division of Administrative Hearings. Pursuant to the requirement of Uniform Rule 28-106.2015(5), Florida Administrative Code, I specifically dispute the following material facts (identified by paragraph number and fact disputed) in the Administrative Complaint:

In the event that you fail to make an election in this matter within twenty-one (21) days from receipt of the Administrative Complaint, your failure to do so may be considered a waiver of your right to elect a hearing in this matter, pursuant to Rule 28-106.111(4), Florida Administrative Code, and the Board may proceed to hear your case.

PLEASE NOTE: Regardless of which option you choose, you may be able to reach a settlement agreement with the Department in your case. Please contact the prosecuting attorney if you wish to do so.

Respondent's Signature _____
Address: _____

Attorney/Qualified Representative* _____
Address: _____

Lic. No.: _____

Phone No.: _____

Phone No.: _____ Fax No.: _____

Fax No.: _____

Email: _____

Email: _____

STATE OF FLORIDA
COUNTY OF _____

*Qualified Representatives must file written requests to appear as such pursuant to Rule 28-106.106, Uniform Rules of Procedure.

Before me, personally appeared _____, whose identity is known to me or produced _____ (type of identification) and who, acknowledges that his/her signature appears above.
Sworn to or affirmed by Affiant before me this _____ day of _____ 20____.

Notary Public-State of Florida

My Commission Expires _____

Type or Print Name

PLEASE MAIL AND/OR FAX COMPLETED FORM TO: Natalia S. Thomas, Assistant General Counsel, DOH, Prosecution Services Unit, 4052 Bald Cypress Way, Bin C-65, Tallahassee, Florida 32399-3265. Telephone Number: (850) 245-4444 ext. [8218]; FAX (850) 245-4662; TDD 1-800-955-8771

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

SETTLEMENT AGREEMENT

Pursuant to Section 120.57(4), Florida Statutes, the above named parties hereby offer this Settlement Agreement (Agreement) and agree to entry of a Final Order of the Board of Nursing (Board) incorporating this Agreement as disposition of the Administrative Complaint, in lieu of any other administrative proceedings. The terms herein become effective only if and when a Final Order accepting this Agreement is issued by the Board and filed with the Department of Health Agency Clerk.

In considering this Agreement, the Board may review all materials gathered during the investigation of this case. If this Agreement is rejected, it, and its presentation to the Board, shall not be used against either party.

STIPULATED FACTS

1. At all times material to this matter, Respondent was a **Certified Nursing Assistant (C.N.A.)** in the State of Florida holding license number **81172**.

2. The Department charged Respondent with an Administrative Complaint that was properly served upon Respondent with violations of Chapters 456 and/or 464,

Florida Statutes. A true and correct copy of the Administrative Complaint is attached hereto and incorporated by reference as Exhibit A.

3. Respondent neither admits nor denies the factual allegations contained in the Administrative Complaint.

STIPULATED LAW

1. Respondent admits that he/she is subject to the provisions of Chapters 456 and 464, Florida Statutes, and the jurisdiction of the Department and the Board.

2. Respondent admits that the stipulated facts, if proven true, constitute violations of Chapter 456 and/or 464, Florida Statutes as alleged in the Administrative Complaint.

3. Respondent agrees that the Agreement is a fair, appropriate, and reasonable resolution of this pending matter.

PROPOSED DISPOSITION

1. The Board of Nursing shall reprimand the license of the Respondent.
2. The Respondent shall pay an administrative fine in the amount of **Fifty dollars (\$50.00)** and investigative costs not to exceed **(One thousand two hundred fifty three dollars and twenty nine cents \$1,253.29)** within **(1 year)** from the date of entry of the Final Order. Payment shall be made to the Board of Nursing and mailed to, DOH/HMQACS, Compliance Management Unit, Bin C76, Post Office Box 6320, Tallahassee, Florida 32314-6320, Attention: Nursing Compliance Officer. **Payment must be made by cashier's check or money order ONLY.** Personal checks will **NOT** be accepted.

3. The Respondent shall enroll in and successfully complete courses in **Legal Aspects of Nursing (4-hours)**. This shall be in addition to other normally required continuing education courses. Verification of course content and course completion must be submitted to the Nursing Compliance Officer within six (6) months from the date of the Final Order accepting this Settlement Agreement. The Board will retain jurisdiction for the purpose of enforcing continuing education requirements.

4. The Respondent shall not violate Chapter 456 or 464, Florida Statutes, the rules promulgated pursuant thereto, any other state or federal law, rule, or regulation relating to the practice or the ability to practice nursing. Violation of an order from another state/jurisdiction shall constitute grounds for violation of the Final Order accepting this Settlement Agreement.

5. It is expressly understood that this Settlement Agreement is subject to the approval of the Department and the Board, and has no force and effect until a Final Order is entered accepting this Settlement Agreement.

6. This Settlement Agreement is executed by the Respondent for the purpose of avoiding further administrative action by the Board of Nursing regarding the acts or omissions specifically set forth in the Administrative Complaint attached hereto.

In this regard, Respondent authorizes the Board to review and examine all investigative file materials concerning Respondent prior to, or in conjunction with, consideration of the Agreement. Furthermore, should this Settlement Agreement not be accepted by the Board, it is agreed that presentation to, and consideration of, this Settlement Agreement and other documents and matters by the Board shall not unfairly or illegally

prejudice the Board or any of its members from further participation, consideration or resolution of these proceedings. Respondent shall offer no evidence, testimony or argument that disputes or contravenes any stipulated fact or conclusion of law.

7. Respondent and the Department fully understand that this Settlement Agreement and subsequent Final Order incorporating same will in no way preclude additional proceedings by the Board and/or Department against the Respondent for acts or omissions not specifically set forth in the Administrative Complaint attached hereto.

This Agreement relates solely to the current disciplinary proceedings arising from the above-mentioned Administrative Complaint and does not preclude further action by other divisions, departments, and/or sections of the Department, including but not limited to the Agency for Health Care Administration's Medicaid Program Integrity Office.

8. The Respondent waives the right to seek any attorney's fees or costs from the Department in connection with this disciplinary proceeding.

9. Respondent waives all rights to appeal and further review of this Agreement and these proceedings.

WHEREFORE, the parties hereto request the Board enter a Final Order accepting and implementing the terms of the Settlement Agreement contained herein.

(Signatures follow on next page.)

SIGNED this ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA

COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public

My Commission Expires:

APPROVED this ____ day of _____, 201__.

John H. Armstrong, MD, FACS
State Surgeon General and
Secretary of Health

Natalia S. Thomas

Assistant General Counsel
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, FL 32399-3265
Florida Bar #83826
(850) 245-4444 telephone
(850) 245-4662 facsimile
Email: natalia.thomas@flhealth.gov

NST/tlr

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

VOLUNTARY RELINQUISHMENT OF LICENSE

Respondent, **JOLEEN KENNEDY, C.N.A.**, license number **81172**, 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 waives 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 waive 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 Relinquishment, 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 Voluntary Relinquishment. 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 ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA
COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public
My Commission Expires:

NST/tlr

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Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

February 2, 2016

Certified Article Number

9414 7266 9904 2017 4876 95

SENDERS RECORD

Joleen Kennedy
401 34th Street North
#104
St. Petersburg, Florida 33714

RE: DOH v. Joleen Kennedy, C.N.A.
Case No. 2014-18419

Dear Ms. Kennedy:

Enclosed please find a copy of an Administrative Complaint that has been filed against your license by the Department of Health. An Election of Rights form is also enclosed.

Please review the attached documents and return the Election of Rights form to my attention. You must return your election to my office within twenty-one (21) days of the date you received it. Failure to return your election within twenty-one (21) days will be considered a waiver of your right to dispute the facts alleged in the Administrative Complaint.

In addition, enclosed is a Settlement Agreement containing terms I believe will be acceptable in resolving this matter without the need for a Formal or Informal Hearing. If you would like to accept the terms of the Settlement Agreement, please sign it before a notary public and return it to my office. Please note that the Settlement Agreement is subject to final approval by the Board of Nursing and is considered disciplinary action.

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Please contact me by phone at 850-245-4444, extension 8218, if you have any questions.

Sincerely,

Natalia S. Thomas
Assistant General Counsel
(850) 245-4444 Ext. 8218

Enclosures: Administrative Complaint, Election of Rights form, Settlement Agreement, and Voluntary Relinquishment form

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN R. KENNEDY, C.N.A.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Joleen R. Kennedy, C.N.A., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing assistance pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Administrative Complaint, Respondent was a certified nursing assistant (C.N.A.) within the State of Florida, having been issued certification number CNA 81172.

3. Respondent is licensed pursuant to Chapter 464, Florida Statutes, and is a health care practitioner as defined in Section 456.001(4), Florida Statutes.

4. Respondent's address of record is P.O. Box 11005, St. Petersburg, Florida, 33733.

5. Respondent's alternate address is 401 34th Street, North, #104, St. Petersburg, Florida, 33714.

6. Respondent's address may also be 1616 21st Street, South, Lot 220, St. Petersburg, Florida, 33712.

7. On or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes.

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11. As set forth above, on or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes, which relates to the Respondent's profession.

12. Based on the foregoing, Respondent violated Section 464.204(1)(b), Florida Statutes (2014), by intentionally violating Section

456.072(1)(c), Florida Statutes (2014), for being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 27th day of January, 2016.

JOHN H. ARMSTRONG, MD, FACS
State Surgeon General and Secretary of Health

N. Thomas

Natalia S. Thomas
Assistant General Counsel
Florida Bar Number 83826
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Telephone: (850) 245-4444 ext. 8218
Facsimile: (850) 245-4662
Email: natalia.thomas@flhealth.gov

/NST

PCP: January 26, 2016
PCP Members: Gordon & Kemp

FILED
Department Of Health
Deputy Clerk
CLERK Angel Sanders
DATE JAN 28 2016

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

ELECTION OF RIGHTS

Please sign and complete all of the information below:

I received the Administrative Complaint on the following date: _____

PLEASE SELECT ONLY 1 OF THE 2 OPTIONS.

OPTION 1. _____ I do not dispute the allegations of material fact in the Administrative Complaint. I request a hearing be conducted pursuant to Section 120.57(2), Florida Statutes, where I will be permitted to appear, if I so choose, and submit oral and/or written evidence in mitigation of the complaint to the Board.

OPTION 2. _____ I do dispute the allegations of material fact contained in the Administrative Complaint and request this to be considered a petition for formal hearing, pursuant to Sections 120.569(2)(a) and 120.57(1), Florida Statutes, before an Administrative Law Judge appointed by the Division of Administrative Hearings. Pursuant to the requirement of Uniform Rule 28-106.2015(5), Florida Administrative Code, I specifically dispute the following material facts (identified by paragraph number and fact disputed) in the Administrative Complaint:

In the event that you fail to make an election in this matter within twenty-one (21) days from receipt of the Administrative Complaint, your failure to do so may be considered a waiver of your right to elect a hearing in this matter, pursuant to Rule 28-106.111(4), Florida Administrative Code, and the Board may proceed to hear your case.

PLEASE NOTE: Regardless of which option you choose, you may be able to reach a settlement agreement with the Department in your case. Please contact the prosecuting attorney if you wish to do so.

Respondent's Signature
Address: _____

Attorney/Qualified Representative*
Address: _____

Lic. No.: _____

Phone No.: _____

Phone No.: _____ Fax No.: _____

Fax No.: _____

Email: _____

Email: _____

STATE OF FLORIDA
COUNTY OF _____

*Qualified Representatives must file written requests to appear as such pursuant to Rule 28-106.106, Uniform Rules of Procedure.

Before me, personally appeared _____, whose identity is known to me or produced _____ (type of identification) and who, acknowledges that his/her signature appears above.

Sworn to or affirmed by Affiant before me this _____ day of _____ 20____

Notary Public-State of Florida

My Commission Expires

Type or Print Name

PLEASE MAIL AND/OR FAX COMPLETED FORM TO: Natalia S. Thomas, Assistant General Counsel, DOH, Prosecution Services Unit, 4052 Bald Cypress Way, Bin C-65, Tallahassee, Florida 32399-3265. Telephone Number: (850) 245-4444 ext. [8218]; FAX (850) 245-4662; TDD 1-800-955-8771

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

SETTLEMENT AGREEMENT

Pursuant to Section 120.57(4), Florida Statutes, the above named parties hereby offer this Settlement Agreement (Agreement) and agree to entry of a Final Order of the Board of Nursing (Board) incorporating this Agreement as disposition of the Administrative Complaint, in lieu of any other administrative proceedings. The terms herein become effective only if and when a Final Order accepting this Agreement is issued by the Board and filed with the Department of Health Agency Clerk.

In considering this Agreement, the Board may review all materials gathered during the investigation of this case. If this Agreement is rejected, it, and its presentation to the Board, shall not be used against either party.

STIPULATED FACTS

1. At all times material to this matter, Respondent was a **Certified Nursing Assistant (C.N.A.)** in the State of Florida holding license number **81172**.
2. The Department charged Respondent with an Administrative Complaint that was properly served upon Respondent with violations of Chapters 456 and/or 464,

Florida Statutes. A true and correct copy of the Administrative Complaint is attached hereto and incorporated by reference as Exhibit A.

3. Respondent neither admits nor denies the factual allegations contained in the Administrative Complaint.

STIPULATED LAW

1. Respondent admits that he/she is subject to the provisions of Chapters 456 and 464, Florida Statutes, and the jurisdiction of the Department and the Board.

2. Respondent admits that the stipulated facts, if proven true, constitute violations of Chapter 456 and/or 464, Florida Statutes as alleged in the Administrative Complaint.

3. Respondent agrees that the Agreement is a fair, appropriate, and reasonable resolution of this pending matter.

PROPOSED DISPOSITION

1. The Board of Nursing shall reprimand the license of the Respondent.

2. The Respondent shall pay an administrative fine in the amount of **Fifty dollars (\$50.00)** and investigative costs not to exceed **(One thousand two hundred fifty three dollars and twenty nine cents \$1,253.29)** within **(1 year)** from the date of entry of the Final Order. Payment shall be made to the Board of Nursing and mailed to, DOH/HMQACS, Compliance Management Unit, Bin C76, Post Office Box 6320, Tallahassee, Florida 32314-6320, Attention: Nursing Compliance Officer. **Payment must be made by cashier's check or money order ONLY.**

Personal checks will **NOT** be accepted.

3. The Respondent shall enroll in and successfully complete courses in **Legal Aspects of Nursing (4-hours)**. This shall be in addition to other normally required continuing education courses. Verification of course content and course completion must be submitted to the Nursing Compliance Officer within six (6) months from the date of the Final Order accepting this Settlement Agreement. The Board will retain jurisdiction for the purpose of enforcing continuing education requirements.

4. The Respondent shall not violate Chapter 456 or 464, Florida Statutes, the rules promulgated pursuant thereto, any other state or federal law, rule, or regulation relating to the practice or the ability to practice nursing. Violation of an order from another state/jurisdiction shall constitute grounds for violation of the Final Order accepting this Settlement Agreement.

5. It is expressly understood that this Settlement Agreement is subject to the approval of the Department and the Board, and has no force and effect until a Final Order is entered accepting this Settlement Agreement.

6. This Settlement Agreement is executed by the Respondent for the purpose of avoiding further administrative action by the Board of Nursing regarding the acts or omissions specifically set forth in the Administrative Complaint attached hereto.

In this regard, Respondent authorizes the Board to review and examine all investigative file materials concerning Respondent prior to, or in conjunction with, consideration of the Agreement. Furthermore, should this Settlement Agreement not be accepted by the Board, it is agreed that presentation to, and consideration of, this Settlement Agreement and other documents and matters by the Board shall not unfairly or illegally

prejudice the Board or any of its members from further participation, consideration or resolution of these proceedings. Respondent shall offer no evidence, testimony or argument that disputes or contravenes any stipulated fact or conclusion of law.

7. Respondent and the Department fully understand that this Settlement Agreement and subsequent Final Order incorporating same will in no way preclude additional proceedings by the Board and/or Department against the Respondent for acts or omissions not specifically set forth in the Administrative Complaint attached hereto.

This Agreement relates solely to the current disciplinary proceedings arising from the above-mentioned Administrative Complaint and does not preclude further action by other divisions, departments, and/or sections of the Department, including but not limited to the Agency for Health Care Administration's Medicaid Program Integrity Office.

8. The Respondent waives the right to seek any attorney's fees or costs from the Department in connection with this disciplinary proceeding.

9. Respondent waives all rights to appeal and further review of this Agreement and these proceedings.

WHEREFORE, the parties hereto request the Board enter a Final Order accepting and implementing the terms of the Settlement Agreement contained herein.

(Signatures follow on next page.)

SIGNED this ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA

COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public

My Commission Expires:

APPROVED this ____ day of _____, 201__.

John H. Armstrong, MD, FACS
State Surgeon General and
Secretary of Health

Natalia S. Thomas

Assistant General Counsel
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, FL 32399-3265
Florida Bar #83826
(850) 245-4444 telephone
(850) 245-4662 facsimile
Email: natalia.thomas@flhealth.gov

NST/tlr

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

VOLUNTARY RELINQUISHMENT OF LICENSE

Respondent, **JOLEEN KENNEDY, C.N.A.**, license number **81172**, 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 waives 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 waive 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 Relinquishment, 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 Voluntary Relinquishment. 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 ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA
COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public
My Commission Expires:

NST/tlr

Mission:

To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.



Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

February 2, 2016

Certified Article Number

9414 7266 9904 2017 4876 88

SENDERS RECORD

Joleen Kennedy
1616 21st Street South
Lot 220
St. Petersburg, Florida 33712

RE: DOH v. Joleen Kennedy, C.N.A.
Case No. 2014-18419

Dear Ms. Kennedy:

Enclosed please find a copy of an Administrative Complaint that has been filed against your license by the Department of Health. An Election of Rights form is also enclosed.

Please review the attached documents and return the Election of Rights form to my attention. You must return your election to my office within twenty-one (21) days of the date you received it. Failure to return your election within twenty-one (21) days will be considered a waiver of your right to dispute the facts alleged in the Administrative Complaint.

In addition, enclosed is a Settlement Agreement containing terms I believe will be acceptable in resolving this matter without the need for a Formal or Informal Hearing. If you would like to accept the terms of the Settlement Agreement, please sign it before a notary public and return it to my office. Please note that the Settlement Agreement is subject to final approval by the Board of Nursing and is considered disciplinary action.

A Voluntary Relinquishment form has also been included in this package for your consideration. Voluntarily relinquishing your license is giving up your ability to practice Nursing in the state of Florida. If you no longer wish to practice Nursing in Florida, please sign the voluntary relinquishment before a notary and return it to my office. Please note that voluntary relinquishment of your license is considered disciplinary action.

Please contact me by phone at 850-245-4444, extension 8218, if you have any questions.

Sincerely,

Natalia S. Thomas
Assistant General Counsel
(850) 245-4444 Ext. 8218

Enclosures: Administrative Complaint, Election of Rights form, Settlement Agreement, and Voluntary Relinquishment form

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN R. KENNEDY, C.N.A.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Joleen R. Kennedy, C.N.A., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing assistance pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Administrative Complaint, Respondent was a certified nursing assistant (C.N.A.) within the State of Florida, having been issued certification number CNA 81172.

3. Respondent is licensed pursuant to Chapter 464, Florida Statutes, and is a health care practitioner as defined in Section 456.001(4), Florida Statutes.

4. Respondent's address of record is P.O. Box 11005, St. Petersburg, Florida, 33733.

5. Respondent's alternate address is 401 34th Street, North, #104, St. Petersburg, Florida, 33714.

6. Respondent's address may also be 1616 21st Street, South, Lot 220, St. Petersburg, Florida, 33712.

7. On or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes.

8. A certified nursing assistant is one of a handful of categories of licensed professionals that provides direct patient care, in many instances, to minors, the elderly or those with long-term infirmities, often in patients' homes or in nursing home settings with access to patients' valuables. As such, entering a plea of nolo contendere to petit theft, relates to the practice

of, or the ability to practice, nursing assistance and violates the level of trust and confidence invested by the Legislature in these categories of licensees.

9. Section 464.204(1)(b), Florida Statutes (2014), provides that intentionally violating any provision of Chapter 464, Chapter 456, or the rules adopted by the board, constitutes grounds for which the board may impose disciplinary sanctions.

10. Section 456.072(1)(c), Florida Statutes (2014), provides that being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession, constitutes grounds for disciplinary action.

11. As set forth above, on or about July 22, 2014, in the Circuit/County Court, in and for Pinellas County, Florida, Respondent entered a plea of nolo contendere to Petit Theft, a first-degree misdemeanor, in violation of Section 812.014(2)(e), Florida Statutes, which relates to the Respondent's profession.

12. Based on the foregoing, Respondent violated Section 464.204(1)(b), Florida Statutes (2014), by intentionally violating Section

456.072(1)(c), Florida Statutes (2014), for being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 27th day of January, 2016.

JOHN H. ARMSTRONG, MD, FACS
State Surgeon General and Secretary of Health

N. Thomas

Natalia S. Thomas
Assistant General Counsel
Florida Bar Number 83826
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Telephone: (850) 245-4444 ext. 8218
Facsimile: (850) 245-4662
Email: natalia.thomas@flhealth.gov

/NST

PCP: January 26, 2016
PCP Members: Gordon & Kemp

FILED
Department Of Health
Deputy Clerk
CLERK Angel Sanders
DATE JAN 28 2016

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

ELECTION OF RIGHTS

Please sign and complete all of the information below:

I received the Administrative Complaint on the following date: _____

PLEASE SELECT ONLY 1 OF THE 2 OPTIONS.

OPTION 1. _____ I do not dispute the allegations of material fact in the Administrative Complaint. I request a hearing be conducted pursuant to Section 120.57(2), Florida Statutes, where I will be permitted to appear, if I so choose, and submit oral and/or written evidence in mitigation of the complaint to the Board.

OPTION 2. _____ I do dispute the allegations of material fact contained in the Administrative Complaint and request this to be considered a petition for formal hearing, pursuant to Sections 120.569(2)(a) and 120.57(1), Florida Statutes, before an Administrative Law Judge appointed by the Division of Administrative Hearings. Pursuant to the requirement of Uniform Rule 28-106.2015(5), Florida Administrative Code, I specifically dispute the following material facts (identified by paragraph number and fact disputed) in the Administrative Complaint:

In the event that you fail to make an election in this matter within twenty-one (21) days from receipt of the Administrative Complaint, your failure to do so may be considered a waiver of your right to elect a hearing in this matter, pursuant to Rule 28-106.111(4), Florida Administrative Code, and the Board may proceed to hear your case.

PLEASE NOTE: Regardless of which option you choose, you may be able to reach a settlement agreement with the Department in your case. Please contact the prosecuting attorney if you wish to do so.

Respondent's Signature _____
Address: _____

Attorney/Qualified Representative* _____
Address: _____

Lic. No.: _____

Phone No.: _____

Phone No.: _____ Fax No.: _____

Fax No.: _____

Email: _____

Email: _____

STATE OF FLORIDA
COUNTY OF _____

*Qualified Representatives must file written requests to appear as such pursuant to Rule 28-106.106, Uniform Rules of Procedure.

Before me, personally appeared _____, whose identity is known to me or produced _____ (type of identification) and who, acknowledges that his/her signature appears above.

Sworn to or affirmed by Affiant before me this _____ day of _____ 20____

Notary Public-State of Florida

My Commission Expires _____

Type or Print Name

PLEASE MAIL AND/OR FAX COMPLETED FORM TO: Natalia S. Thomas, Assistant General Counsel, DOH, Prosecution Services Unit, 4052 Bald Cypress Way, Bin C-65, Tallahassee, Florida 32399-3265. Telephone Number: (850) 245-4444 ext. [8218]; FAX (850) 245-4662; TDD 1-800-955-8771

STATE OF FLORIDA
DEPARTMENT OF HEALTH

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

SETTLEMENT AGREEMENT

Pursuant to Section 120.57(4), Florida Statutes, the above named parties hereby offer this Settlement Agreement (Agreement) and agree to entry of a Final Order of the Board of Nursing (Board) incorporating this Agreement as disposition of the Administrative Complaint, in lieu of any other administrative proceedings. The terms herein become effective only if and when a Final Order accepting this Agreement is issued by the Board and filed with the Department of Health Agency Clerk.

In considering this Agreement, the Board may review all materials gathered during the investigation of this case. If this Agreement is rejected, it, and its presentation to the Board, shall not be used against either party.

STIPULATED FACTS

1. At all times material to this matter, Respondent was a **Certified Nursing Assistant (C.N.A.)** in the State of Florida holding license number **81172**.
2. The Department charged Respondent with an Administrative Complaint that was properly served upon Respondent with violations of Chapters 456 and/or 464,

Florida Statutes. A true and correct copy of the Administrative Complaint is attached hereto and incorporated by reference as Exhibit A.

3. Respondent neither admits nor denies the factual allegations contained in the Administrative Complaint.

STIPULATED LAW

1. Respondent admits that he/she is subject to the provisions of Chapters 456 and 464, Florida Statutes, and the jurisdiction of the Department and the Board.

2. Respondent admits that the stipulated facts, if proven true, constitute violations of Chapter 456 and/or 464, Florida Statutes as alleged in the Administrative Complaint.

3. Respondent agrees that the Agreement is a fair, appropriate, and reasonable resolution of this pending matter.

PROPOSED DISPOSITION

1. The Board of Nursing shall reprimand the license of the Respondent.

2. The Respondent shall pay an administrative fine in the amount of **Fifty dollars (\$50.00)** and investigative costs not to exceed **(One thousand two hundred fifty three dollars and twenty nine cents \$1,253.29)** within **(1 year)** from the date of entry of the Final Order. Payment shall be made to the Board of Nursing and mailed to, DOH/HMQACS, Compliance Management Unit, Bin C76, Post Office Box 6320, Tallahassee, Florida 32314-6320, Attention: Nursing Compliance Officer. **Payment must be made by cashier's check or money order ONLY.**

Personal checks will **NOT** be accepted.

3. The Respondent shall enroll in and successfully complete courses in **Legal Aspects of Nursing (4-hours)**. This shall be in addition to other normally required continuing education courses. Verification of course content and course completion must be submitted to the Nursing Compliance Officer within six (6) months from the date of the Final Order accepting this Settlement Agreement. The Board will retain jurisdiction for the purpose of enforcing continuing education requirements.

4. The Respondent shall not violate Chapter 456 or 464, Florida Statutes, the rules promulgated pursuant thereto, any other state or federal law, rule, or regulation relating to the practice or the ability to practice nursing. Violation of an order from another state/jurisdiction shall constitute grounds for violation of the Final Order accepting this Settlement Agreement.

5. It is expressly understood that this Settlement Agreement is subject to the approval of the Department and the Board, and has no force and effect until a Final Order is entered accepting this Settlement Agreement.

6. This Settlement Agreement is executed by the Respondent for the purpose of avoiding further administrative action by the Board of Nursing regarding the acts or omissions specifically set forth in the Administrative Complaint attached hereto.

In this regard, Respondent authorizes the Board to review and examine all investigative file materials concerning Respondent prior to, or in conjunction with, consideration of the Agreement. Furthermore, should this Settlement Agreement not be accepted by the Board, it is agreed that presentation to, and consideration of, this Settlement Agreement and other documents and matters by the Board shall not unfairly or illegally

prejudice the Board or any of its members from further participation, consideration or resolution of these proceedings. Respondent shall offer no evidence, testimony or argument that disputes or contravenes any stipulated fact or conclusion of law.

7. Respondent and the Department fully understand that this Settlement Agreement and subsequent Final Order incorporating same will in no way preclude additional proceedings by the Board and/or Department against the Respondent for acts or omissions not specifically set forth in the Administrative Complaint attached hereto.

This Agreement relates solely to the current disciplinary proceedings arising from the above-mentioned Administrative Complaint and does not preclude further action by other divisions, departments, and/or sections of the Department, including but not limited to the Agency for Health Care Administration's Medicaid Program Integrity Office.

8. The Respondent waives the right to seek any attorney's fees or costs from the Department in connection with this disciplinary proceeding.

9. Respondent waives all rights to appeal and further review of this Agreement and these proceedings.

WHEREFORE, the parties hereto request the Board enter a Final Order accepting and implementing the terms of the Settlement Agreement contained herein.

(Signatures follow on next page.)

SIGNED this ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA
COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public
My Commission Expires:

APPROVED this ____ day of _____, 201__.

John H. Armstrong, MD, FACS
State Surgeon General and
Secretary of Health

Natalia S. Thomas
Assistant General Counsel
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, FL 32399-3265
Florida Bar #83826
(850) 245-4444 telephone
(850) 245-4662 facsimile
Email: natalia.thomas@flhealth.gov

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-18419

JOLEEN KENNEDY, C.N.A.,

RESPONDENT.

VOLUNTARY RELINQUISHMENT OF LICENSE

Respondent, **JOLEEN KENNEDY, C.N.A.**, license number **81172**, 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 waives 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 waive 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 Relinquishment, 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 Voluntary Relinquishment. 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 ____ day of _____, 201__.

JOLEEN KENNEDY, C.N.A.

STATE OF FLORIDA

COUNTY OF _____

Before me personally appeared _____ 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 ____ day of _____, 201__.

Notary Public

My Commission Expires:

NST/tlr

**STATE OF FLORIDA
BOARD OF NURSING**

BOARD: Nursing

CASE NUMBER: 2015-20369

COMPLAINT MADE BY: DOH/CSU

DATE OF COMPLAINT: October 19, 2015

SUBJECT: Trenice Mulcahy, C.N.A.
1155 North Court Tenay Pauy
Apartment B 240
Merritt Island, Florida 32953

SUBJECT'S ATTORNEY: Pro Se

INVESTIGATED BY: Diane Bates
CSU

REVIEWED BY: Mary S. Miller
Assistant General Counsel

RECOMMENDATION: 4097
Reconsideration

CLOSING ORDER ON RECONSIDERATION

THE COMPLAINT: The Complaint alleged that Subject violated Section 464.204(1)(b), Florida Statutes (2015), by intentionally violating Section 456.072(1)(c), Florida Statutes (2015), by being convicted, or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of a licensee's profession, or the ability to practice a licensee's profession.

THE FACTS: On August 27, 2015, the Subject entered a plea of nolo contendere to one count of Possession of Drug Paraphernalia, a crime

which relates to the practice of, or ability to practice the Subject's profession of nursing assistance. On March 22, 2016, the Department filed an Administrative Complaint against the Subject's license alleging the Subject violated Section 464.204(1)(b), Florida Statutes (2015), by intentionally violating Section 456.072(1)(c), Florida Statutes (2015).

The Subject died on April 13, 2016. The Subject's death certificate information is included in the Department's investigative file.

THE LAW: This case has been closed because the Subject is deceased.

It is, therefore, ORDERED that this matter be, and same is hereby, DISMISSED.

DONE AND ORDERED this _____ day of _____, 2016.

CHAIRPERSON, PROBABLE CAUSE PANEL BOARD
OF NURSING

/MSM

PCP:

PCP Members:

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

Case No.: 2015-20369

TRENICE D. MULCAHY, C.N.A.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Trenice D. Mulcahy, C.N.A., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing assistance pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Complaint, Respondent was a certified nursing assistant (C.N.A.) within the state of Florida, having been issued license number CNA 304565.

3. Respondent's address of record is 1155 North Court Tenay Pauty, Apartment B 240, Merritt Island, Florida 32953.

4. On July 1, 2015, Respondent was arrested by an officer from the Palm Bay Police Department for one count of Possession of Cannabis, Less Than 20 Grams.

5. On July 16, 2015, in the County Court for the Eighteenth Judicial Circuit, in and for Brevard County, Florida, in case no. 05-2015-MM-032939-AXXX-XX, Respondent was charged with one count of Possession of Cannabis, Less Than 20 Grams, a first degree misdemeanor in violation of Section 893.13(6), Florida Statutes.

6. On August 27, 2015, in the County Court for the Eighteenth Judicial Circuit, in and for Brevard County, Florida, in case no. 05-2015-MM-032939-AXXX-XX, Respondent entered a plea of nolo contendere to Possession of Drug Paraphernalia, a first degree misdemeanor, in violation of Section 893.147(1), Florida Statutes.

7. Certified Nursing Assistants often have access to patients' medications and finances as part of their duties. Respondent's plea of nolo contendere to Possession of Drug Paraphernalia relates to the practice of, or the ability to practice Respondent's profession: nursing assistance.

8. Section 464.204(1)(b), Florida Statutes (2015), makes it a violation of the Nurse Practice Act for a C.N.A. to intentionally violate any

provision of Chapter 464, Chapter 456, or the rules adopted by the Board of Nursing.

9. Section 456.072(1)(c), Florida Statutes (2015), provides that being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of a licensee's profession, or to the ability to practice a licensee's profession, constitutes grounds for disciplinary action.

10. As set forth above, on August 27, 2015, in the County Court for Eighteenth Judicial Circuit, in and for Brevard County, Florida, Respondent entered a plea of nolo contendere to one count of Possession of Drug Paraphernalia, a crime that relates to the practice of, or the ability to practice her profession: nursing assistance.

11. Based on the foregoing, Respondent violated Section 464.204(1)(b), Florida Statutes (2015), by intentionally violating Section 456.072(1)(c), Florida Statutes (2015), by being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the practice of, or the ability to practice, a licensee's profession.

WHEREFORE, Petitioner respectfully requests that the Board of Nursing enter an Order imposing one or more of the following penalties:

permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 22 day of March, 2016.

Celeste Philip, MD, MPH
Interim State Surgeon General

Mary S. Miller

Mary S. Miller
Assistant General Counsel
Fla. Bar No. 0780420
Office of the General Counsel
4052 Bald Cypress Way, Bin C#65
Tallahassee, Florida 32399-3265
Telephone (850) 245 – 4444, ext. 8104
Facsimile (850) 245 – 4662
Mary.Miller2@flhealth.gov

FILED

DEPARTMENT OF HEALTH
DEPUTY CLERK

CLERK: Orlando Sanders

DATE: MAR 22 2016

PCP: March 22, 2016
PCP Members: Horne & Desmond

/MSM

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

STATE OF FLORIDA
BOARD OF NURSING

BOARD: Nursing

CASE NUMBER: 2014-05110

COMPLAINT MADE BY: Holmes Regional Medical Center
Attn.: Susan Stehman
1350 South Hickory Street
Melbourne, Florida 32901

DATE OF COMPLAINT: April 3, 2014

RESPONDENT: Eve Lorraine Soyka, RN
3937 Saint Armens Circle
Melbourne, Florida 32934

RESPONDENT'S ATTORNEY: Maurice Arcadier
Arcadier & Associates, PA
2815 W. New Haven Ave., Ste. 304
Melbourne, Florida 32904

INVESTIGATED BY: Jeannette Cassano
Orlando ISU

REVIEWED BY: Ann L. Prescott
Assistant General Counsel

RECOMMENDATION: 4097
Reconsideration

CLOSING ORDER ON RECONSIDERATION

THE COMPLAINT: The Complaint alleged Subject violated Section 464.018(1)(j), Florida Statutes (2013), for being unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of

alcohol, drugs, narcotics, or chemicals, or any other type of material or as a result of any mental or physical condition.

THE FACTS: On or about February 13, 2014, Subject was terminated from her employment at Holmes Regional Medical Center under allegations of theft, diversion, and/or impairment. Subject submitted to a reasonable cause drug screen at that time, which returned negative.

On or about June 18, 2014, Subject submitted to a Department-ordered mental and physical evaluation. The evaluator opined that Subject was not safe to practice nursing with reasonable skill and safety. Based on this evaluation, the Department filed an Administrative Complaint against Subject's license on August 12, 2015, alleging that Subject was unable to practice nursing with reasonable skill and safety.

However, Subject voluntarily submitted to an additional evaluation, on or about December 19, 2014, in which the evaluator opined that Subject was not impaired, and was able to practice nursing with reasonable skill and safety.

In light of the conflicting expert opinions available in this matter, and the age of each opinion, it is recommended that this case be closed, as the Department may be unable to meet its evidentiary burden if the matter goes to a formal hearing. The Panel therefore directs this case be dismissed.

LAW: There was sufficient evidence for the Panel to have found probable cause. However, based on the above facts, the Department, pursuant to the provisions of Section 20.43(3), Florida Statutes, has determined that there is insufficient evidence to support the continued prosecution of the allegations contained in the Administrative Complaint. Therefore, pursuant to Section 456.073(2), Florida Statutes, this case is hereby DISMISSED.

It is, therefore, ORDERED that this matter be, and same is hereby, DISMISSED.

DONE AND ORDERED this _____ day of _____, 2016.

CHAIRPERSON, PROBABLE CAUSE PANEL
BOARD OF NURSING

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2014-05110

EVE LORRAINE SOYKA, R.N.,

RESPONDENT.

_____ /

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Eve Lorraine Soyka, R.N., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Administrative Complaint, Respondent was a registered nurse (R.N.) within the state of Florida, having been issued license number RN 3399422.

3. Respondent's address of record is 3937 Saint Armens Circle, Melbourne, Florida 32934.

4. Section 464.018(1)(j), Florida Statutes (2013), states in pertinent part, "the department shall have, upon a finding of the State Surgeon General or the State Surgeon General's designee that probable cause exists to believe that the licensee is unable to practice nursing because of the reasons stated in this paragraph, the authority to issue an order to compel a licensee to submit to a mental or physical examination by physicians designated by the department."

5. On or about May 2, 2014, the Department issued an Order Compelling An Examination, ordering Respondent to be evaluated by Dr. T.J., M.D., on June 17, 2014.

6. On or about June 17, 2014, Respondent submitted to a mental and physical examination by Dr. T.J., a physician, Board Certified in addiction medicine.

7. Dr. T.J. opined that Respondent is not presently safe to practice nursing with reasonable skill and safety.

8. Section 464.018(1)(j), Florida Statutes (2013), subjects a licensee to discipline, including suspension, for being unable to practice

nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals, or any other type of material or as a result of any mental or physical condition.

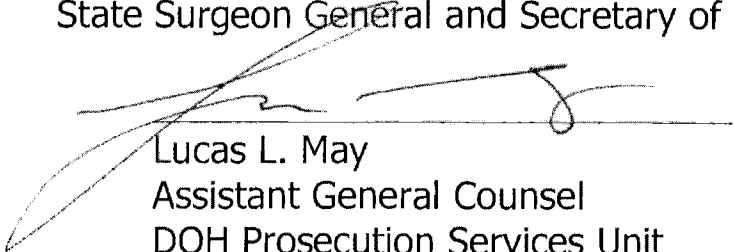
9. As set forth above, Respondent cannot practice nursing with reasonable skill and safety according to an evaluation by a physician Board Certified in addiction medicine.

10. Based on the foregoing, Respondent has violated Section 464.018(1)(j), Florida Statutes (2013), by being unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 11 day of August, 2015.

John H. Armstrong, MD, FACS
State Surgeon General and Secretary of Health



Lucas L. May
Assistant General Counsel
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Florida Bar No.: 0102747
(850) 245-4444 ext. 8242 Telephone
(850) 245 - 4683 Facsimile
Lucas.May@flhealth.gov

/LLM

PCP: August 11, 2015

PCP Members: Jessie Colin PhD, RN & Anna Hubbard, ARNP

FILED
DEPARTMENT OF HEALTH
DEPUTY CLERK
CLERK *Angel Sanders*
DATE 8/12/2015

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

Maurice Arcadier, Esq. MBA*

Ashley Severance, Esq. of Counsel

Fernando M. Palacios, Esq. of Counsel

ARCADIER
& ASSOCIATES
Florida's Legal Team
AV Rated

Stephen Biggie, Esq.

Joseph C. Wood, Esq.

Eve Travis, Esq. of Counsel

August 26, 2015

REQUEST FOR HEARING

VIA EMAIL (Lucas.May@flhealth.gov), FAX (850) 245-4683, and REGULAR U.S. MAIL

2015 AUG 31 AM 9:52
PRACTITIONER REGULATION
LEGAL

Re: Department of Health v. Eve Lorraine Soyka, RN
Case No: 2014-05110
Date of Receipt: August 17, 2015

Dear Mr. May:

Pursuant to rule 28-106.2015(5), Ms. Eve Lorraine Soyka requests a hearing to be conducted pursuant to Florida Law.

Ms Soyka will be represented by Arcadier and Associates through attorney Maurice Arcadier

Ms. Soyka and Mr. Arcadier can be reached and served as follows:

c/o Arcadier and Associates
2815 W. New Haven, #304
Melbourne, Florida 32904
Tel: 321-953-5998
Fax: 321-953-6075
email: arcadier@wamalaw.com

Statement of Facts in Dispute:

The Department of Health has pursued Ms. Soyka with meritless and frivolous allegations. Initially, Ms. Soyka was being investigated by the Department based on unsupported preposterous allegations from her prior employer who sought to retaliate against Ms. Soyka for asserting her unpaid overtime rights. Ms. Soyka sought her unpaid wage claims against HealthFirst. These unpaid wage claims have now been resolved through a confidential settlement agreement with HealthFirst.

After the preposterous and frivolous claims of drug use were all disproved, the Department of Health devised a new theory to go after Ms. Soyka. The Department hired a biased medical doctor to render a medical report that alleged Ms. Soyka was not fit for duty.

Ms. Soyka then sought from a neutral, renown board certified doctor, a medical report as to her fitness of duty to be a nurse, which of course, confirmed that Ms. Soyka was and is fit for duty.

This report was timely provided to the Department of Health.

As such, the following paragraphs from the Administrative Complaint, are denied:

#3, #4, #5, #6, #7, #9, #10.

Finally, the letter of August 13, 2015 drafted by Mr. Kay, references an election of rights form. The package received did not contain this election of rights form. As such, to the extent a form needs to be sent, it is requested that the Department of Health send the appropriate form(s) to the undersigned.

Sincerely,

A handwritten signature in black ink, appearing to read 'Maurice Arcadier', written over a light blue horizontal line.

Maurice Arcadier
For Respondent, Eve Soyka

ARCADIER
& ASSOCIATES
Florida's Legal Team

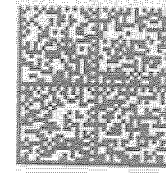
- 2815 W. New Haven, #304, Melbourne, FL 32904
- 433 Plaza Real, Suite 275, Boca Raton, FL 33432
- 7380 W. Sand Lake Rd., #500, Orlando, FL 32819

Luke

Florida Dept. of Health
Prosecution Services Unit
4052 Bald Cypress way
Bin C-65
Tallahassee, FL

323993325193

ORLANDO
FL 327
08 AUG '15
PM 7 1



UNITED STATES POSTAGE
PITNEY BOWES
02 1P \$ 000.485
0000264514 AUG 26 2015
MAILED FROM ZIP CODE 32904

9414 7266 9904 2007 0956 57

TO:

Date Mailed 10/31/2014

Maurice Arcadier, Esquire
Arcadier & Associates,
2815 West Haven Avenue,
Melbourne, Florida 32904

SENDER:

REFERENCE: May
Soyka 14-05110 456 Request

PS Form 3800, January 2005

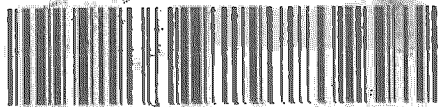
RETURN RECEIPT SERVICE	Postage	
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	Restricted Delivery	
	Total Postage & Fees	

USPS®
Receipt for
Certified Mail™

No Insurance Coverage Provided
Do Not Use for International Mail

POSTMARK OR DATE

2. Article Number



9414 7266 9904 2007 0956 57

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
	11/4/14
C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
X <i>[Signature]</i>	
D. Is delivery address different from Item 1? If YES, enter delivery address below:	<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Service Type CERTIFIED MAIL®

4. Restricted Delivery? (Extra Fee) Yes

1. Article Addressed to:

Maurice Arcadier, Esquire
Arcadier & Associates,
2815 West Haven Avenue,
Melbourne, Florida 32904

Lucas L. May
Soyka 14-05110 456 Request

PS Form 3811, January 2005

Domestic Return Receipt

2014 NOV 06 AM 10:18
PRADITIONER RE-EST-AM
LEGAL

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



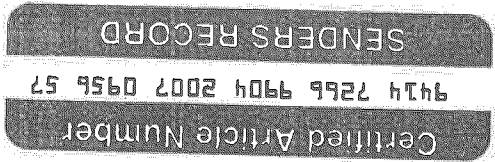
Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General & Secretary

Vision: To be the Healthiest State in the Nation

October 29, 2014

Maurice Arcadier, Esquire
Arcadier & Associates,
2815 West Haven Avenue,
Melbourne, Florida 32904



Re: Complaint No.: 2014-05110
Respondent: Eve Lorraine Soyka, R.N.

Dear Mr. Arcadier:

Pursuant to Section 456.073(10), Florida Statutes, enclosed is a copy of the Department's complete investigative file in this matter. Section 456.073(10), Florida Statutes provides in part:

. . . Upon completion of the investigation and a recommendation by the department to find probable cause, and pursuant to a written request by the subject or the subject's attorney, the department shall provide the subject an opportunity to inspect the investigative file or, at the subject's expense, forward to the subject a copy of the investigative file. Notwithstanding s. 456.057, the subject may inspect or receive a copy of any expert witness report or patient record connected with the investigation if the subject agrees in writing to maintain the confidentiality of any information received under this subsection until 10 days after probable cause is found and to maintain the confidentiality of patient records pursuant to s. 456.057...

Also enclosed is an invoice for copying charges. Please send a copy of the invoice, along with payment, to the Department of Health, Finance and Accounting, 4052 Bald Cypress Way, B-01. Finally, when opening your disc you will be prompted to enter a password. The password to be entered is: 456

If you have any questions, please call me at (850) 245-4444 extension 8242.

Respectfully,

Lucas L. May
Assistant General Counsel

LLM/pb

Enclosures: Invoice # MQPR15-199
Investigative File #2014-05110

Florida Department of Health
Office of the General Counsel • Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65 • Tallahassee, FL 32399-1701
Express mail address: 2585 Merchants Row – Suite 105
PHONE: 850/245-4444 • FAX 850/245-4683

www.FloridasHealth.com
TWITTER: HealthyFLA
FACEBOOK: FLDepartmentofHealth
YOUTUBE: fldoh

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General & Secretary

Vision: To be the Healthiest State in the Nation

DATE: OCTOBER 28, 2014

INVOICE NUMBER: MQPR15-199

To:

Maurice Arcadier Esquire
Arcadier & Associates
2815 West New Haven Avenue
Melbourne Florida 32904

SERVICE RENDERED	AMOUNT
(copy) ___ Pages @\$.15 Per Page	\$
___ Pages @\$.75 Per Page (Color Copied)	\$
<u>1</u> CD @ \$8.00 Each	\$ 8.00
Charge to Certify Above Copies	\$
X-Ray Duplication Charge	\$
Research Charge (if over one half hour)	
At \$__per hour x __hours	\$
Postage & Handling Fees:	\$
TOTAL AMOUNT DUE UPON RECEIPT	\$ 8.00

Payment Options: Cashier Check or Money Order made payable to:

Florida DOH, Division of MQA

Please reference the INVOICE NUMBER on your Payment—Mail to the below address.

Organization Code: 64-75-03-01-017

Expense Code: 497000

EO Code: PA

Profession: Nursing

Case Name: Eve Soyka

Case Number: 2014-05110

Florida Department of Health
Office of the General Counsel • Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65 • Tallahassee, FL 32399-3665
Express mail address: 2585 Merchants Row – Suite 105
PHONE: 850-245-4444 • FAX 850-245-4684

www.FloridasHealth.com
TWITTER: HealthyFLA
FACEBOOK: FLDepartmentofHealth
YOUTUBE: fidoH

**Acknowledgement of and
Agreement to Maintain Patient Confidentiality** 2014 OCT 20 AM 10:02

I, EVE SOYKA, am the Subject of an investigation by the Department of Health. As the Subject of such an investigation, I am entitled to inspect or receive a copy of the investigative report, including any expert witness report or patient records connected with the investigation pursuant to Section 456.073(10), Florida Statutes, if I agree in writing to maintain the confidentiality of any information received under this provision, until 10 days after probable cause is found and to maintain the confidentiality of patient records pursuant to Section 456.057, Florida Statutes.

I understand the cost associated with duplicating x-rays and I want () do not want () to receive a copy of any x-rays that are contained within the Investigative file.


SIGNED this 16th day of October, 2014.



Eve Soyka, U.P.N., 2014-11758

~ OR ~

SIGNED this 17 day of October, 2014



Maurice Arcadier, Esq. MBA
ON BEHALF OF Eve Soyka, R.N.
Counsel of Record
2014-05110

STATE OF FLORIDA
BOARD OF NURSING

BOARD: Nursing

CASE NUMBER: 2015-23363

COMPLAINT MADE BY: IPN
PO Box 46130
Jacksonville, Florida 32240

DATE OF COMPLAINT: August 18, 2015

RESPONDENT: Robert Phillip Turner, RN
10140 SE 68th Court
Bellevue, Florida 34420

RESPONDENT'S ATTORNEY Joanne Kenna
The Health Law Firm
1101 Douglas Ave.
Altamonte Springs, Florida 32714

INVESTIGATED BY: Tamra Doke
Alachua ISU

REVIEWED BY: Ann L. Prescott
Assistant General Counsel

RECOMMENDATION: 4097
Reconsideration

CLOSING ORDER ON RECONSIDERATION

THE COMPLAINT: The Complaint alleged Subject violated Section 464.018(1)(j), Florida Statutes (2015), for being unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals, or any other type of material or as a result of any mental or physical condition.

THE FACTS: On or about June 6, 2015, Respondent submitted to an employer-ordered drug screen, which returned positive for marijuana metabolites. On or about July 14, 2015, Respondent submitted to a Department-ordered mental and physical evaluation. The evaluator opined that Respondent was not able to practice nursing with reasonable skill and safety. Based on this, the Department filed an Administrative Complaint against Respondent's license on February 11, 2016, alleging that Respondent tested positive on an employer-ordered drug screen and also was unable to practice nursing with reasonable skill and safety.

However, Respondent has since signed a monitoring contract with the Intervention Project for Nurses (IPN), with a projected active monitoring period of December 10, 2015, through December 9, 2020. As of April 19, 2016, Respondent is compliant with this contract.

In light of Respondent's compliance with the terms of IPN monitoring, the Panel directs this case be dismissed.

LAW: There was sufficient evidence for the Panel to have found probable cause. However, based on the above facts, the Department, pursuant to the provisions of Section 20.43(3), Florida Statutes, has determined that there is insufficient evidence to support the continued prosecution of the allegations contained in the Administrative Complaint. Therefore, pursuant to Section 456.073(2), Florida Statutes, this case is hereby DISMISSED.

It is, therefore, ORDERED that this matter be, and same is hereby, DISMISSED.

DONE AND ORDERED this _____ day of _____, 2016.

CHAIRPERSON, PROBABLE CAUSE PANEL
BOARD OF NURSING

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2015-23363

ROBERT PHILLIP TURNER, R.N.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health (Department), by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Robert Phillip Turner, R.N., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Complaint, Respondent was a registered nurse (R.N.) within the state of Florida, having been issued license number RN 9335619.

3. Respondent's address of record is 10140 Southeast 68th Court, Belleview, Florida 34420.

4. At all times material to this Administrative Complaint, Respondent was employed as a registered nurse by Ocala Health.

5. On or about June 6, 2015, Respondent submitted to an employer-ordered drug screen.

6. Section 112.0455(5)(a), Florida Statutes (2014), provides that "Drug" means alcohol, including distilled spirits, wine, malt beverages, and intoxicating liquors; amphetamines; cannabinoids; cocaine; phencyclidine (PCP); hallucinogens; methaqualone; opiates; barbiturates; benzodiazepines; synthetic narcotics; designer drugs; or a metabolite of any of the substances listed herein.

7. On or about June 10, 2015, Respondent tested positive for marijuana metabolites, a drug listed in Section 112.0455(5)(a), Florida Statutes (2014), on a confirmed employer-ordered drug screen.

8. Marijuana is a colloquial term for cannabis, which contains cannabinoids. According to Section 893.03(1), Florida Statutes, cannabis is a Schedule I controlled substance that has a high potential for abuse and has no currently accepted medical use in treatment in Florida. The term

does not include "low-THC cannabis," as defined in Section 381.986, Florida Statutes, if manufactured, possessed, sold, purchased, delivered, distributed, or dispensed, in conformance with Section 381.986, Florida Statutes.

9. Respondent failed to provide a lawful prescription and legitimate medical reason for using marijuana.

10. On or about July 14, 2015, Respondent submitted to a mental and physical examination conducted by J.S., M.D., a board certified specialist in psychiatry and addiction psychiatry.

11. On or about July 14, 2015, Dr. J.S. opined that Respondent does not have reasonable skill and safety to return to the practice of nursing.

COUNT I

12. Petitioner realleges and incorporates paragraphs one through eleven as if fully set forth herein.

13. Section 456.072(1)(aa), Florida Statutes (2014), subjects a licensee to discipline for testing positive for any drug, as defined in Section 112.0455, Florida Statutes (2014), on any confirmed pre-employment or employer-ordered drug screening when the practitioner does not have a lawful prescription and legitimate medical reason for using the drug.

14. As set forth above, Respondent tested positive for marijuana, on an employer-ordered confirmed drug screen. Respondent did not provide a lawful prescription for marijuana, and he did not have a legitimate medical reason for using marijuana.

15. Based on the foregoing, Respondent violated Section 456.072(1)(aa), Florida Statutes (2014), which subjects a licensee to discipline for testing positive for any drug, as defined in Section 112.0455, Florida Statutes (2014), on any confirmed pre-employment or employer-ordered drug screening when the practitioner does not have a lawful prescription and legitimate medical reason for using the drug.

COUNT II

16. Petitioner realleges and incorporates paragraphs one through eleven as if fully set forth herein.

17. Section 464.018(1)(j), Florida Statutes (2015), subjects a licensee to discipline, for being unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition.

18. As set forth above, Respondent is unable to practice nursing with reasonable skill and safety. In a recent evaluation, Dr. J.S. opined that Respondent does not have reasonable skill and safety to return to the practice of nursing.

19. Based on the foregoing, Respondent violated Section 464.018(1)(j), Florida Statutes (2015), by being unable to practice nursing with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of material or as a result of any mental or physical condition.

[Remainder of page intentionally left blank]

WHEREFORE, Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 10th day of February, 2016.

JOHN H. ARMSTRONG, MD, FACS
State Surgeon General and Secretary of Health



JUDSON SEARCY

Assistant General Counsel
Fla. Bar No. 98772
Prosecution Services Unit
Florida Department of Health
4052 Bald Cypress Way, Bin #C65
Tallahassee, FL 32399-3265
Telephone: (850) 245-4444 ex. 8100
Facsimile: (850) 245-4683
Email: judson.searcy@flhealth.gov

FILED
DEPARTMENT OF HEALTH
DEPUTY CLERK

CLERK: 

DATE 2/11/16

PCP: 02/09/2016

PCP Members: Forst & Kirkpatrick

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

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Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

BY APPOINTMENT:
37 N. ORANGE AVENUE, SUITE 500
ORLANDO, FLORIDA 32801

BY APPOINTMENT:
201 E. GOVERNMENT STREET
PENSACOLA, FLORIDA 32502
TELEPHONE: (850) 439-1001

BY APPOINTMENT:
155 E. BOARDWALK DRIVE, SUITE 424
FORT COLLINS, COLORADO 80525
TELEPHONE: (970) 416-7456
TELEFAX: (866) 203-1464



"REPRESENTING HEALTHCARE PROVIDERS"
RESPOND ONLY TO MAIN OFFICE:
1101 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FLORIDA 32714
TELEPHONE: (407) 331-6620
TELEFAX: (407) 331-3030
WWW.THEHEALTHLAWFIRM.COM

GEORGE F. INDEST III, J.D., M.P.A., LL.M.
FLORIDA, LOUISIANA, AND D.C.
BOARD CERTIFIED BY THE FLORIDA
BAR IN HEALTH LAW

MICHAEL L. SMITH, J.D.
FLORIDA
REGISTERED RESPIRATORY THERAPIST
BOARD CERTIFIED BY THE FLORIDA
BAR IN HEALTH LAW

JOANNE KENNA, R.N., J.D.
FLORIDA
REGISTERED NURSE (ILLINOIS)

CAROLE C. SCHRIEFER, R.N., J.D.
FLORIDA, COLORADO, AND VIRGINIA
REGISTERED NURSE (COLORADO)

CHRISTOPHER E. BROWN, J.D.
FLORIDA

LANCE O. LEIDER, J.D.
FLORIDA

LENNE L. ARCHER, J.D., M.P.H.
FLORIDA AND TEXAS

JUSTIN A. GREEN, J.D., LL.M.
FLORIDA

MATTHEW R. GROSS, J.D., P.A.
FLORIDA
(OF COUNSEL)

March 14, 2016

VIA TELEFAX AND CERTIFIED MAIL- RETURN RECEIPT

Judson Searcy, Esquire
Department of Health
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Telefax: (850) 245-4662

7014 0150 0001 6264 3233

Re: Department of Health v. Robert Phillip Turner, R.N.
DOH Case No.: 2015-23363; Our File No.: 2014/001
SUBMISSION OF EXECUTED ELECTION OF RIGHTS

Dear Mr. Searcy:

As you know, The Health Law Firm is representing Robert Turner, R.N., in the above-referenced matter. Enclosed is the Election of Rights form that has been executed by Mr. Turner making an election for a formal hearing before an Administrative Law Judge appointed by the Division of Administrative Hearings.

Sincerely,

THE HEALTH LAW FIRM, by:


JOANNE KENNA

cc: Robert Turner, R.N.

ELECTION OF RIGHTS

Please sign and complete all of the information below:

I received the Administrative Complaint on the following date: 2/25/2016

PLEASE SELECT ONLY 1 OF THE 2 OPTIONS.

OPTION 1. I do not dispute the allegations of material fact in the Administrative Complaint. I request a hearing be conducted pursuant to Section 120.57(2), Florida Statutes, where I will be permitted to appear, if I so choose, and submit oral and/or written evidence in mitigation of the complaint to the Board.

OPTION 2. X I do dispute the allegations of material fact contained in the Administrative Complaint and request this to be considered a petition for formal hearing, pursuant to Sections 120.569(2)(a) and 120.57(1), Florida Statutes, before an Administrative Law Judge appointed by the Division of Administrative Hearings. Pursuant to the requirement of Uniform Rule 28-106.2015(5), Florida Administrative Code, I specifically dispute the following material facts (identified by paragraph number and fact disputed) in the Administrative Complaint:

7, 8, 9, 11, 12, 13, 14, 15, 16, 17, 18 AND 19

In the event that you fail to make an election in this matter within twenty-one (21) days from receipt of the Administrative Complaint, your failure to do so may be considered a waiver of your right to elect a hearing in this matter, pursuant to Rule 28-106.111(4), Florida Administrative Code, and the Board may proceed to hear your case.

PLEASE NOTE: Regardless of which option you choose, you may be able to reach a settlement agreement with the Department in your case. Please contact the prosecuting attorney if you wish to do so.

Respondent's Signature [Signature]
Address: 10140 SE 68TH CT
BELLFLOWER, FL 34420
Lic. No.: [Redacted]
Phone No.: [Redacted] Fax No.: [Redacted]
Email: [Redacted]

JOANNE KENNA, ESQ.
Attorney/Qualified Representative*
Address: THE HEALTH LAW FIRM
1101 DOUGLAS AVE., ALTAMONTE SPRINGS, FL 32714
Phone No.: 407-331-6620
Fax No.: 407-331-3030
Email: JKENNA@THEHEALTHLAWFIRM.COM

STATE OF FLORIDA
COUNTY OF MARION

*Qualified Representatives must file written requests to appear as such pursuant to Rule 28-106.106, Uniform Rules of Procedure.

Before me, personally appeared Robert Turner, whose identity is known to me or produced, FL DL (type of identification) and who, acknowledges that his/her signature appears above, Sworn to or affirmed by Affiant before me this 2 day of March 2016

[Signature]
Notary Public - State of Florida
Breion Lofton
Type or Print Name

11/29/2019
My Commission Expires
Breion Lofton
State of Florida
My Commission Expires 11/22/2019
Commission No. 07938805

PLEASE MAIL AND/OR FAX COMPLETED FORM TO: Judson Searcy, Assistant Commissioner of the Department of Health Services Unit, 4052 Bald Cypress Way, Bin C-65, Tallahassee, Florida 32399-3265. Telephone Number: (850) 245-4444; FAX (850) 245-4662; TDD 1-800-955-8771

TELEFAX COVER SHEET THE HEALTH LAW FIRM

GEORGE F. INDEST III*
LICENSED IN FLORIDA, LOUISIANA
AND THE DISTRICT OF COLUMBIA
BOARD CERTIFIED BY THE FLORIDA
BAR IN HEALTH LAW

MICHAEL L. SMITH, J.D.*
LICENSED IN FLORIDA
REGISTERED RESPIRATORY THERAPIST
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RESPOND ONLY TO MAIN OFFICE:

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Altamonte Springs, FL 32714
Telephone: (407) 331-6620
Telefax: (407) 331-3030**

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BRANCH OFFICE:
**37 N. ORANGE AVENUE, STE. 500
ORLANDO, FLORIDA 32801**

BRANCH OFFICE:
**201 E. GOVERNMENT STREET
PENSACOLA, FLORIDA 32501
TELEPHONE: (850) 439-1001**

BRANCH OFFICE:
**155 E. BOARDWALK DRIVE, STE. 424
FORT COLLINS, COLORADO 80525
TELEPHONE: (970) 416-7456**

JOANNE KENNA, R.N., J.D.

LICENSED IN FLORIDA
REGISTERED NURSE*
(*ILLINOIS)

CAROLE C. SCHRIEFER, R.N., J.D.
LICENSED IN FLORIDA AND COLORADO
REGISTERED NURSE*
(*COLORADO)

CHRISTOPHER E. BROWN, J.D.
LICENSED IN FLORIDA

LANCE O. LEIDER, J.D.
LICENSED IN FLORIDA

CATHERINE T. HOLLIS, J.D.
LICENSED IN FLORIDA

MATTHEW R. GROSS, J.D., P.A.
LICENSED IN FLORIDA
(OF COUNSEL)

Date: March 14, 2016

No. of Pages (incl. cover sheet): 3 Pages

TO: Judson Searcy, Esquire, Assistant General Counsel

Organization: Florida Department of Health

Our File No.: 2014/001

Case/Re: DOH v. Robert P. Turner, R.N.
DOH Case No.: 2015-23363

FAX NUMBER: (850) 245-4662

Sent By: Shelly Estes

Remarks: Please see the attached letter dated March 14, 2016, regarding waiver of time for case transfer to DOAH.

WARNING: THIS FACSIMILE CONTAINS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED SOLELY FOR THE USE OF THE ADDRESSEE(S) NAMED ABOVE. IF YOU ARE NOT THE INTENDED RECIPIENT OF THIS FACSIMILE, OR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION OR COPYING OF THIS FACSIMILE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS FACSIMILE IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL TO US AT THE ABOVE ADDRESS VIA THE US POSTAL SERVICE. THANK YOU.

PLEASE TELEPHONE IMMEDIATELY IF ALL PAGES ARE NOT RECEIVED.

HARD COPY TO FOLLOW BY MAIL/COURIER: YES NO

BY APPOINTMENT:
37 N. ORANGE AVENUE, SUITE 500
ORLANDO, FLORIDA 32801

BY APPOINTMENT:
201 E. GOVERNMENT STREET
PENSACOLA, FLORIDA 32502
TELEPHONE: (850) 439-1001

BY APPOINTMENT:
155 E. BOARDWALK DRIVE, SUITE 424
FORT COLLINS, COLORADO 80525
TELEPHONE: (970) 418-7458
TELEFAX: (888) 203-1484



"REPRESENTING HEALTHCARE PROVIDERS"
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JUSTIN A. GREEN, J.D., LL.M.
FLORIDA

MATTHEW R. GROSS, J.D., P.A.
FLORIDA
(OF COUNSEL)

March 14, 2016

VIA TELEFAX AND U.S. MAIL

Judson Searcy, Esquire
Department of Health
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Telefax: (850) 245-4662

Re: Department of Health v. Robert Phillip Turner, R.N.
DOH Case No.: 2015-23363; Our File No.: 2014/001
WAIVER OF TIME FOR CASE TRANSFER TO DOAH

Dear Mr. Searcy:

Under separate cover on this date, I have submitted an Election of Rights form electing a hearing before the Division of Administrative Hearings (DOAH) in this matter. It is my understanding you are arranging for this case to be taken back to the Probable Cause Panel given that Mr. Turner was under an Intervention Project for Nurses (IPN) contract at the time this case was considered by the Probable Cause Panel.

Given my understanding of the plan for this case, Mr. Turner agrees to waive the 45-day requirement for the Department of Health's (DOH) transfer of this case to DOAH.

If my understanding regarding the plan for this case is incorrect, please let me know. Also, do not hesitate to contact me if you have any questions or if there is additional information I can provide you.

Judson Searcy, Esquire
Department of Health
March 14, 2016
- Page 2 -

Thank you for your cooperation and your assistance.

Sincerely,

THE HEALTH LAW FIRM, by:



JOANNE KENNA

cc: Robert Turner, R.N.

JK.jk S:\2000-2099\2014\001\310-Letters-Draft\DOH-Searcy-4.wpd

**STATE OF FLORIDA
BOARD OF NURSING**

BOARD: Board of Nursing

CASE NUMBER: 2015-02491

COMPLAINT MADE BY: DOH/CSU

DATE OF COMPLAINT: January 22, 2015

SUBJECT: Patricia Lynn McCoy, R.N.
P.O. Box 95
Jonancy, KY 41538

SUBJECT'S ATTORNEY: Pro Se

INVESTIGATED BY: Antoinette F. Carter
CSU

REVIEWED BY: Mary S. Miller
Assistant General Counsel

RECOMMENDATION: Reconsideration (4097)
Null & Void

RECONSIDERATION / CLOSING ORDER

THE COMPLAINT: The complaint alleges the Subject violated Section 464.018(1)(b), Florida Statutes (2014), by having a license to practice nursing revoked, suspended, or otherwise acted against.

THE FACTS: On January 8, 2015, the Kentucky Board of Nursing acted against the Subject's Kentucky nursing license by reprimanding the Subject's Kentucky nursing license, required the Subject to pay an administrative fine and complete continuing education courses. An Administrative Complaint was filed against the Subject's Florida nursing license on September 18, 2015. Since the filing of the Administrative Complaint but before the Subject was served with the Administrative

Complaint, the Department discovered that the Subject's license expired on April 30, 2014 and the Subject's license became NULL AND VOID on May 3, 2016.

THE LAW: It was revealed that Subject's license expired on April 30, 2014, and the Subject's license became NULL AND VOID on May 3, 2016.

The Department and the Probable Cause Panel have determined that based upon the Subject's license being null and void, this case should be dismissed without further prosecution. Should Subject re-apply, the allegations addressed in this case shall be addressed before a new license will be issued by the Board of Nursing.

It is, therefore ordered that this matter be, and same is hereby: **DISMISSED.**

DONE AND ORDERED this _____ day of _____, 2016.

CHAIR, PROBABLE CAUSE PANEL
BOARD OF NURSING

/MSM

PCP:
PCP Members:

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2015-02491

PATRICIA MCCOY, R.N.,

RESPONDENT.

_____ /

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Patricia McCoy, R.N., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Administrative Complaint, Respondent was a licensed registered nurse within the state of Florida, having been issued license number RN 3065052.

3. Respondent's address of record is Post Office Box 95, Jonancy, Kentucky 41538.

4. The Kentucky Board of Nursing is the licensing authority for nurses in the state of Kentucky.

5. Respondent's Kentucky nursing license is license number 1105594.

6. On or about January 8, 2015, the Kentucky Board of Nursing entered an Order, whereby Respondent's Kentucky nursing license was reprimanded, and Respondent was required to pay a fine of \$1,500 and complete a total of ninety (90) continuing education credits.

7. Section 464.018(1)(b), Florida Statutes (2014), provides that having a license to practice nursing revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, territory, or country constitutes grounds for disciplinary action.

8. Respondent had a license to practice nursing revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, territory, or

country, when on or about on or about January 8, 2015, the Kentucky Board of Nursing entered an Order, disciplining Respondent's license by reprimanding Respondent's license as well as imposing a fine and requiring further continuing education.

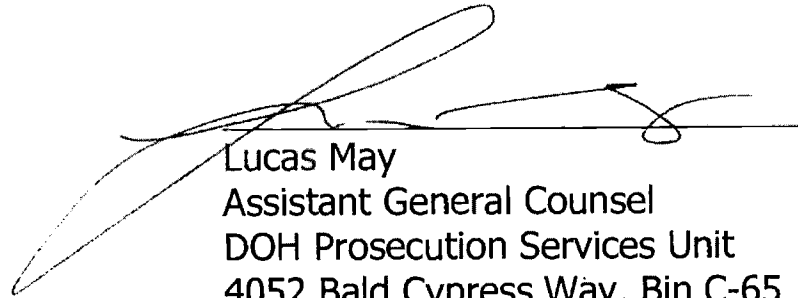
9. Based on the foregoing, Respondent violated Section 464.018(1)(b), Florida Statutes (2014), by having a license to practice nursing revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, territory, or country.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 8 day of September,

2015.

John H. Armstrong, MD, FACS
State Surgeon General and Secretary of
Health



Lucas May
Assistant General Counsel
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Florida Bar No.: 0102747
(850) 245 - 4444 ext. 8242 Telephone
(850) 245 - 4662 Facsimile
Lucas.May@flhealth.gov

/LLM

PCP: 9/8/15

PCP Members: Kirkpatrick & Katz

FILED
DEPARTMENT OF HEALTH
DEPUTY CLERK
CLERK *Angel Sanders*
DATE SEP 09 2015

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

**STATE OF FLORIDA
BOARD OF NURSING**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2016-07930

ROMAN S. STRELKOV, R.N.,

RESPONDENT.

_____ /

AMENDED ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Amended Administrative Complaint before the Board of Nursing against Respondent, Roman S. Strelkov, R.N., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.

2. At all times material to this Administrative Complaint, Respondent was a registered nurse (RN) within the state of Florida, having been issued license number RN 9381249.

3. Respondent's address of record is 423 Fletcher Street, Port Charlotte, Florida 33954.

4. On or about August 10, 2015, in the Twelfth Judicial Circuit in and for Sarasota County, Florida, Respondent entered a plea of guilty to two counts of larceny grand theft of a controlled substance, a third-degree felony, in violation of Section 812.014, Florida Statutes; a plea of nolo contendere to one count of narcotic equipment possession and/or use, a first-degree misdemeanor in violation of Section 893.147, Florida Statutes; and a plea of nolo contendere to one count of larceny petit theft, a second-degree misdemeanor in violation of Section 812.014, Florida Statutes.

5. A registered nurse is one of a handful of categories of licensed professionals that provide direct patient care, in many instances, to the elderly and other vulnerable individuals, often in patient's homes, in hospitals, or in nursing home settings. They are in a unique position to have direct access to patients' belongings, medications, and personal information. As such, entering a plea of guilty to larceny grand theft of a controlled substance, and pleas of nolo contendere to narcotic equipment possession and/or use and larceny petit theft, directly relates to the practice of registered nursing or the ability to practice registered nursing

and violates the trust and confidence invested by the Legislature in these licensees.

6. Respondent failed to report the above pleas to the Board in writing to the board within 30 days after Respondent entered the plea.

COUNT I

7. Petitioner realleges and incorporates paragraphs one (1) through six (6) as if fully set forth herein.

8. Section 464.018(1)(c), Florida Statutes (2015), provides that being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the practice of nursing or the ability to practice nursing constitutes grounds for disciplinary action.

9. Respondent entered pleas of guilty and nolo contendere to crimes which directly relate to the practice of nursing or ability to practice nursing when, on or about August 10, 2015, in the Twelfth Judicial Circuit in and for Sarasota County, Florida, Respondent entered the above pleas to larceny grand theft of a controlled substance, a third-degree felony in violation of Section 812.014, F.S.; narcotic equipment possession and/or use, a first-degree misdemeanor in violation of Section 893.147, F.S.; and

larceny petit theft, a second-degree misdemeanor in violation of Section 812.014, F.S.

10. Based on the foregoing, Respondent violated Section 464.018(1)(c), Florida Statutes (2015), by being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the practice of nursing or the ability to practice nursing.

COUNT II

11. Petitioner reallages and incorporates paragraphs one (1) through six (6) as if fully set forth herein.

12. Section 456.072(1)(x), Florida Statutes (2015), provides that failing to report to the board, or the department if there is no board, in writing within thirty (30) days after the licensee has been convicted or found guilty of, or entered a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction constitutes grounds for discipline.

13. Respondent failed to report to the Board, in writing, within 30 days of the date Respondent entered a plea of guilty to two counts of larceny grand theft of a controlled substance, a third-degree felony in violation of Section 812.014, Florida Statutes.

14. Respondent failed to report to the Board, in writing, within 30 days of the date Respondent entered a plea of nolo contendere to one count of narcotic equipment possession and/or use, a first-degree misdemeanor in violation of Section 893.147, Florida Statutes, and to one count of larceny petit theft, a second-degree misdemeanor in violation of Section 812.014, Florida Statutes.

15. Based on the foregoing, Respondent violated Section 456.072(1)(x), Florida Statutes (2015), by failing to report to the board in writing within thirty (30) days after the licensee has been convicted or found guilty of, or entered a plea of nolo contendere to, regardless of adjudication a crime in any jurisdiction.

COUNT III

16. Petitioner reallages and incorporates paragraphs one (1) through six (6) as if fully set forth herein.

17. Section 464.018(1)(e), Florida Statutes (2015), provides that having been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, any offense prohibited under s. 435.04 or similar statute of another jurisdiction; or having committed an act which

constitutes domestic violence as defined in s. 741.28, constitutes grounds for discipline.

18. Section 435.04(2)(cc), Florida Statutes (2015), lists violations of Chapter 812, relating to theft, robbery, and related crimes, if the offense is a felony.

19. Respondent entered a plea of guilty to an offense prohibited under s. 435.04, F.S., when on or about August 10, 2015, in the Twelfth Judicial Circuit in and for Sarasota County, Florida, Respondent entered a plea of guilty to two counts of larceny grand theft of a controlled substance, a third-degree felony in violation of chapter 812, F.S.

20. Based on the foregoing, Respondent violated Section 464.018(1)(e), Florida Statutes (2015), by having been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, any offense prohibited under s. 435.04 or similar statute of another jurisdiction; or having committed an act which constitutes domestic violence as defined in s. 741.28.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties:

permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this _____ day of _____, 2016.

Celeste Philip, MD, MPH
Interim State Surgeon General

Ann L. Prescott
Assistant General Counsel
DOH Prosecution Services Unit
4052 Bald Cypress Way, Bin C-65
Tallahassee, Florida 32399-3265
Florida Bar Number 0092974
(850) 245 – 4444 Telephone
(850) 245 - 4662 Facsimile
Email: Ann.Prescott@flhealth.gov

/ALP

PCP:

PCP Members:

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

DEPARTMENT OF HEALTH,

PETITIONER,

v.

CASE NO. 2016-07930

ROMAN S. STRELKOV, R.N.,

RESPONDENT.

ADMINISTRATIVE COMPLAINT

COMES NOW, Petitioner, Department of Health, by and through its undersigned counsel, and files this Administrative Complaint before the Board of Nursing against Respondent, Roman S. Strelkov, R.N., and in support thereof alleges:

1. Petitioner is the state agency charged with regulating the practice of nursing pursuant to Section 20.43, Florida Statutes; Chapter 456, Florida Statutes; and Chapter 464, Florida Statutes.
2. At all times material to this Administrative Complaint, Respondent was a registered nurse (RN) within the state of Florida, having been issued license number RN 9381249.

3. Respondent's address of record is 423 Fletcher Street, Port Charlotte, Florida 33954.

4. On or about August 10, 2015, in the Twelfth Judicial Circuit in and for Sarasota County, Florida, Respondent entered a plea of guilty to two counts of larceny grand theft of a controlled substance, a third-degree felony, in violation of Section 812.014, Florida Statutes; a plea of nolo contendere to one count of narcotic equipment possession and/or use, a first-degree misdemeanor in violation of Section 893.147, Florida Statutes; and a plea of nolo contendere to one count of larceny petit theft, a second-degree misdemeanor in violation of Section 812.014, Florida Statutes.

5. A registered nurse is one of a handful of categories of licensed professionals that provide direct patient care, in many instances, to the elderly and other vulnerable individuals, often in patient's homes, in hospitals, or in nursing home settings. They are in a unique position to have direct access to patients' belongings, medications, and personal information. As such, entering a plea of guilty to larceny grand theft of a controlled substance, and pleas of nolo contendere to narcotic equipment possession and/or use and larceny petit theft, directly relates to the practice of registered nursing or the ability to practice registered nursing

and violates the trust and confidence invested by the Legislature in these licensees.

6. Respondent failed to report the above pleas to the Board in writing to the board within 30 days after Respondent entered the plea.

COUNT I

7. Petitioner realleges and incorporates paragraphs one (1) through six (6) as if fully set forth herein.

8. Section 464.018(1)(c), Florida Statutes (2015), provides that being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the practice of nursing or the ability to practice nursing constitutes grounds for disciplinary action.

9. Respondent entered a pleas of guilty and nolo contendere to crimes which directly relate to the practice of nursing or ability to practice nursing when, on or about August 10, 2015, in the Twelfth Judicial Circuit in and for Sarasota County, Florida, Respondent entered the above pleas to larceny grand theft of a controlled substance, a third-degree felony in violation of Section 812.014, F.S.; narcotic equipment possession and/or use, a first-degree misdemeanor in violation of Section 893.147, F.S.; and

larceny petit theft, a second-degree misdemeanor in violation of Section 812.014, F.S.

10. Based on the foregoing, Respondent violated Section 464.018(1)(c), Florida Statutes (2015), by being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the practice of nursing or the ability to practice nursing.

COUNT II

11. Petitioner realleges and incorporates paragraphs one (1) through six (6) as if fully set forth herein.

12. Section 456.072(1)(x), Florida Statutes (2015), provides that failing to report to the board, or the department if there is no board, in writing within thirty (30) days after the licensee has been convicted or found guilty of, or entered a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction constitutes grounds for discipline.

13. Respondent failed to report to the Board, in writing, within 30 days of the date Respondent entered a plea of guilty to two counts of larceny grand theft of a controlled substance, a third-degree felony in violation of Section 812.014, Florida Statutes.

14. Respondent failed to report to the Board, in writing, within 30 days of the date Respondent entered a plea of nolo contendere to one count of narcotic equipment possession and/or use, in violation of Section 893.147, Florida Statutes, and to one count of larceny petit theft, a second-degree misdemeanor in violation of Section 812.014, Florida Statutes.

15. Based on the foregoing, Respondent violated Section 456.072(1)(x), Florida Statutes (2015), by failing to report to the board in writing within thirty (30) days after the licensee has been convicted or found guilty of, or entered a plea of nolo contendere to, regardless of adjudication a crime in any jurisdiction.

WHEREFORE, the Petitioner respectfully requests that the Board of Nursing enter an order imposing one or more of the following penalties: permanent revocation or suspension of Respondent's license, restriction of practice, imposition of an administrative fine, issuance of a reprimand, placement of the Respondent on probation, corrective action, refund of fees billed or collected, remedial education and/or any other relief that the Board deems appropriate.

SIGNED this 22 day of March, 2016.

Celeste Philip, MD, MPH
Interim State Surgeon General



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/ALP

PCP: March 22, 2016

PCP Members: Horne & Desmond

FILED
Department Of Health
Deputy Clerk
CLERK *Angel Sanders*
DATE **MAR 22 2016**

NOTICE OF RIGHTS

Respondent has the right to request a hearing to be conducted in accordance with Section 120.569 and 120.57, Florida Statutes, to be represented by counsel or other qualified representative, to present evidence and argument, to call and cross-examine witnesses and to have subpoena and subpoena duces tecum issued on his or her behalf if a hearing is requested.

A request or petition for an administrative hearing must be in writing and must be received by the Department within 21 days from the day Respondent received the Administrative Complaint, pursuant to Rule 28-106.111(2), Florida Administrative Code. If Respondent fails to request a hearing within 21 days of receipt of this Administrative Complaint, Respondent waives the right to request a hearing on the facts alleged in this Administrative Complaint pursuant to Rule 28-106.111(4), Florida Administrative Code. Any request for an administrative proceeding to challenge or contest the material facts or charges contained in the Administrative Complaint must conform to Rule 28-106.2015(5), Florida Administrative Code.

Mediation under Section 120.573, Florida Statutes, is not available to resolve this Administrative Complaint.

NOTICE REGARDING ASSESSMENT OF COSTS

Respondent is placed on notice that Petitioner has incurred costs related to the investigation and prosecution of this matter. Pursuant to Section 456.072(4), Florida Statutes, the Board shall assess costs related to the investigation and prosecution of a disciplinary matter, which may include attorney hours and costs, on the Respondent in addition to any other discipline imposed.