The attached are Primary Source Documents of the Idaho Board of Nursing for:

LISA ANN ANDERSON

Idaho Board of Nursing – PO Box 83720 – Boise, Idaho 83720-0061 – (208) 334-3110
Lisa Ann Anderson  
1425 Vista Drive  
Gooding ID 83330

Dear Ms. Anderson:

During their meeting on January 27-28, 2011, the Board of Nursing members took action to accept the Findings of Fact, Conclusions of Law and Final Order in which your professional nurse license, N-22211 was revoked. During the period of revocation, you may not practice nursing in the State of Idaho. Enclosed is a copy of the Final Order.

The Order became effective January 28, 2011. Please be advised that you may not apply for reinstatement for a period of two (2) years from the date of this order.

Sincerely,

[Signature]

SANDRA EVANS, MAEd, RN  
Executive Director

SE:lhe  
enclosure
BEFORE THE IDAHO STATE BOARD OF NURSING

In the Matter of the License of:  

LISA ANN ANDERSON,  
License No. N-22211,  
Respondent.  

)  )  )  
)  )  )  )  
Case No. BON 09-086  
FINDINGS OF FACT,  
CONCLUSIONS OF LAW AND  
FINAL ORDER  

Having reviewed the documents and correspondence contained in the administrative file in this matter, the Idaho State Board of Nursing (the “Board”) hereby enters the following Findings of Fact, Conclusions of Law, and Final Order:

FINDINGS OF FACT

1. Lisa Ann Anderson (“Respondent”) is licensed by the Board, under License No. N-22211, to engage in the practice of nursing in the state of Idaho.

2. On November 20, 2009, the Board received a Report of Violation of the Nursing Practice Act, which alleged that Respondent had diverted narcotics while employed at Gooding County Memorial Hospital in Gooding, Idaho. The report was based upon an investigation initiated by Lorraine Reinhardt, the DNS, after she was notified that the E.R. Controlled Substance Take Home Pack Dispensed Sheet indicated that four patients from the previous night had received Norco (aka Hydrocodone 10/325), but that Norco had not been ordered for any of those patients.


4. On November 13, 2009, Ms. Reinhardt suspended Respondent pending the completion of the investigation and requested that Respondent submit to a drug test. Respondent did not submit to the drug test as she had admittedly taken Norco that morning pursuant to her prescription.

5. During the investigation, Ms. Reinhardt conducted a chart audit for the period beginning July 9, 2009, through November 12, 2009, which revealed the following discrepancies involving twenty-eight (28) different patients:

FINDINGS OF FACT, CONCLUSIONS OF LAW AND FINAL ORDER - 1
a. Respondent documented that she dispensed a take-home narcotic pack to patients without an order for a take-home narcotic pack by the provider to all twenty-eight (28) patients;

b. Respondent documented that she dispensed a take-home narcotic pack to two (2) of the twenty-eight (28) patients (Patients R and Y) who had a prescription to be filled by the pharmacy outside of the hospital;

c. Respondent documented that she dispensed a take-home narcotic pack to one (1) patient (Patient G) who had already been dispensed a take-home narcotic pack by that patient’s assigned nurse without an order from the patient’s provider;

d. Respondent documented that she dispensed a take-home narcotic pack to one (1) patient (Patient B) who was eventually admitted to the hospital and would not need a take-home narcotic pack;

e. Respondent documented that she dispensed six (6) take-home narcotic packs to patients (Patients M, N, O, P, Q and S) one to five days after they had been discharged from the emergency room; and

f. Respondent documented that she dispensed take-home narcotic packs to two (2) patients (Patients W and Z) who were identified as being high-risk for narcotics and are not issued take-home narcotic packs.


7. Ms. Reinhardt’s chart audit also revealed documentation issues involving the patient labels for the same twenty-eight (28) patients, including:

   a. Missing patient information on the E.R. Controlled Substance Take Home Pack Dispensed Sheets for all twenty-eight (28) patients;

   b. Eighteen (18) of the patient labels had been cut to alter the ability to
identify the patient information;

c. Ten (10) patient labels were hand-written by Respondent which did not include necessary patient information; and

d. One (1) patient label was altered to change the first name of the patient from Ron to Rachel.

8. Ms. Reinhardt’s investigation also revealed that on November 11, 2009, Respondent signed out twenty (20) Norco from the pharmacy to be delivered to the acute care unit. It is documented on the Proof of Use sheet that only ten (10) Norco were received by the acute care unit on November 11, 2009. Respondent could not provide an explanation for the ten (10) missing Norco to Ms. Reinhardt.


10. On July 6, 2009, Respondent was charged with one (1) count of acquiring or obtaining possession of a controlled substance by misrepresentation, fraud, forgery, deception or subterfuge, a felony, in violation of Idaho Code § 37-2734(a)(3).

11. Between July 8, 2009, and November 12, 2009, Respondent was charged with fifteen (15) additional counts of acquiring or obtaining possession of a controlled substance by misrepresentation, fraud, forgery, deception or subterfuge, a felony, in violation of Idaho Code § 37-2734(a)(3). These additional fifteen charges were later dismissed upon motion of the prosecution on February 18, 2010.

12. On June 10, 2010, at the conclusion of Respondent’s jury trial, Respondent was acquitted on the initial charge of acquiring or obtaining possession of a controlled substance by misrepresentation, fraud, forgery, deception or subterfuge, a felony, in violation of Idaho Code § 37-2734(a)(3).

13. On December 22, 2010, Respondent voluntarily surrendered her nursing license. In the course of voluntarily surrendering her license, Respondent did not admit that she violated any of the Board’s laws or rules. She did, however, acknowledge that
the Board has sufficient evidence from which it might find and conclude that such a violation occurred. She also waived her rights to a hearing, and she consented to the Board entering an order accepting her voluntary surrender and revoking or otherwise disciplining her license as the Board deemed appropriate in its discretion. A true and correct copy of the voluntary surrender form signed by Respondent is attached hereto as Exhibit A.

14. Respondent knowingly and freely waived her right to a hearing, and waived all rights granted to Respondent pursuant to the Administrative Procedures Act, chapter 52, title 67, Idaho Code.

CONCLUSIONS OF LAW

1. As a licensed nurse in the state of Idaho, Respondent is subject to the jurisdiction of the Board and to the provisions of title 54, chapter 14, Idaho Code, and the rules and regulations promulgated by the Board thereunder.

2. The allegations in the complaint, if proven, would constitute violations of the Nurse Practice Act and constitute grounds for revocation or suspension of Respondent’s license to practice nursing pursuant to Idaho Code § 54-1413, specifically:

   a. Idaho Code § 54-1413(1)(g) and Board Rule 100.08 (a nurse shall not violate the Board’s laws, rules or standards of conduct and practice);

   b. Board Rule 101.04.e (a nurse shall not obtain, possess, furnish or administer prescription drugs to any person, including self, except as directed by a person authorized by law to prescribe drugs);

   c. Board Rule 101.05.c (a nurse shall be responsible and accountable for his nursing judgments, actions and competence);

   d. Board Rule 101.05.e (a nurse shall make or keep accurate, intelligible entries into records required by law, employment or customary practice of nursing, and shall not falsify, destroy, alter or knowingly make incorrect or unintelligible entries into patients’ records or employer or employee records); and
e. Board Rule 101.05.f (a nurse shall respect the property of the patient and employer and shall not take or divert equipment, materials, property, or drugs without prior consent or authorization).

3. Pursuant to Idaho Code § 54-1413(3)(a), Respondent’s voluntary surrender of her license empowers the Board, without a hearing, to accept Respondent’s voluntary surrender and to revoke or suspend Respondent’s license and/or impose such conditions, limitations, or restrictions on her license as the Board in its discretion may deem appropriate.

ORDER

Based upon the foregoing Findings of Fact and Conclusions of Law, and good cause being shown, it is hereby ordered that:

1. The Board accepts the voluntary surrender of License No. N-22211 issued to Respondent, Lisa Anderson.

2. License No. N-22211 issued to Respondent, Lisa Anderson, is hereby:
   
   ✓ Revoked: Respondent may not apply for reinstatement for a two (2) year period after entry of this Order or a _____ year period after entry of this Order, whichever period is greater.

   ___ Suspended: _____ days _____ year(s) ____ indefinitely. Respondent’s license shall be a single-state license during the term of suspension and Respondent shall not be eligible to practice on the Compact privilege in any other state participating in the Nurse Licensure Compact with the State of Idaho.

3. At such time as Respondent requests reinstatement of licensure, she shall comply with the requirements of Idaho Code § 54-1411(3) and IDAPA 23.01.01.120. This will include, but is not limited to, providing the following information to the Board:
   
   a. Health Care Providers: Respondent must provide Board Staff with a written list of her attending health care providers (including without limitation any therapists, counselors, or other mental health care providers);

   b. Health Care Provider’s Evaluation: Respondent’s health care
providers ("provider") must submit to the Board the provider’s evaluation describing Respondent’s current medical condition(s) and listing her prescriptions, including the dose/frequency and rationale for the medications prescribed. This evaluation shall be submitted on a form provided by the Board. The provider shall also identify any concerns that he/she may have about Respondent’s ability to safely practice nursing and what restrictions, if any, should be placed upon Respondent’s practice. When requesting such evaluations, Respondent shall provide the provider with, and request that the provider review, the Idaho Board of Nursing Position on Safety to Practice. A copy of the Idaho Board of Nursing Position on Safety to Practice is attached as Exhibit B.;

c. A recent, within 6 months, comprehensive drug/alcohol evaluation completed by a qualified Board approved evaluator at the time of application for reinstatement.

d. A detailed summary of employment since licensure revocation or suspension;

e. **Self-Evaluation:** Respondent must prepare and submit a written self-evaluation on a form provided by the Board. Respondent’s self-evaluation must address her ability to practice nursing safely as provided in the Idaho Board of Nursing Position on Safety to Practice; and

f. **Other Information:** Respondent shall submit any additional documents or information requested by the Board in order to evaluate Respondent’s safety to practice.
4. The Board reserves the right to assess investigative costs incurred in this matter as a condition of reinstatement, and to impose such other conditions upon Respondent's reinstated license as the Board may deem appropriate in its discretion.

This order is effective immediately.

DATED this 26th day of January, 2011.

IDAHO STATE BOARD OF NURSING

By

Susan Odom, Ph.D., R.N.
Chair

NOTICE OF DUE PROCESS RIGHTS

NOTE: THIS NOTICE IS PROVIDED SOLEY FOR COMPLIANCE WITH IDAHO CODE § 67-5248, AND IS NOT INTENDED TO REINSTATE ANY RIGHTS PREVIOUSLY WAIVED BY RESPONDENT.

This is a final order of the Board. Any party may file a motion for reconsideration of this final order within fourteen (14) days of the issuance date of this order. The Board will dispose of the petition for reconsideration within twenty-one (21) days of its receipt, or the petition will be considered denied by operation of law. See Idaho Code § 67-5246(4).

Pursuant to Idaho Code §§ 67-5270 and 67-5272, any party aggrieved by this final order or orders previously issued in this case may appeal this final order and all previously issued orders in this case to district court by filing a petition in the district court of the county in which:

a. A hearing was held,

b. The final Board action was taken,

c. The party seeking review of the order, resides, or

d. The real property or personal property that was the subject of the Board action is located.

An appeal must be filed within twenty-eight (28) days (a) of the service date of this final order, (b) of an order denying petition for reconsideration, or (c) the failure within twenty-one (21) days to grant or deny a petition for reconsideration, whichever is later. See Idaho Code § 67-5273. The filing of an appeal to district court does not itself stay the effectiveness or enforcement of the order under appeal.

FINDINGS OF FACT, CONCLUSIONS OF LAW AND FINAL ORDER - 7
CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 31st day of January, 2011, I caused to be served a true and correct copy of the foregoing by the following method to:

Lisa Ann Anderson
1425 Vista Drive
Gooding, ID 83330

Andrew J. Snook
Deputy Attorney General
P.O. Box 83720
Boise, ID 83720-0010

☐ U.S. Mail
☐ Hand Delivery
☒ Certified Mail, Return Receipt Requested
☐ Overnight Mail
☐ Facsimile: __________________________
☐ Statehouse Mail

☐ U.S. Mail
☐ Hand Delivery
☐ Certified Mail, Return Receipt Requested
☐ Overnight Mail
☐ Facsimile: __________________________
☒ Statehouse Mail

Linda Coley
Management Assistant
Idaho Board of Nursing

FINDINGS OF FACT, CONCLUSIONS OF LAW AND FINAL ORDER - 8
IDAHO STATE BOARD OF NURSING
VOLUNTARY SURRENDER OF NURSING LICENSE
Idaho Code § 54-1413(3)(a)

I, LISA ANN ANDERSON, hereby voluntarily surrender my license to practice nursing, License No. N-22211, to the Idaho State Board of Nursing (the “Board”) and will immediately discontinue practicing as a nurse in the State of Idaho. By affixing my signature hereto, I acknowledge that:

1. I have been advised that, without my consent, no legal action can be taken against me except as allowed by the Idaho Administrative Procedures Act, Title 67, Chapter 52, Idaho Code and the laws and rules governing the practice of nursing, Title 54, Chapter 14, Idaho Code.

2. I have been advised of and I understand the nature of the allegations against me pertaining to: my altering of records and checking out patient take home narcotics without an order from the provider.

3. I understand that I have the following rights, among others: the right to representation by legal counsel, the right to a formal hearing, to reasonable notice of such hearing, to present evidence and testimony on my behalf, to compel the testimony of witnesses, to cross-examine the witnesses against me, and the right to request reconsideration or to appeal this matter to district court. I waive all such rights afforded to me without further process as a resolution of any claims or allegations which might otherwise be brought against me by the Board.

4. I also waive the right to contest this surrender and the right to challenge the Board for bias in any subsequent proceedings concerning this matter.

5. I understand that upon acceptance by the Board of the voluntary surrender of my license to practice as a nurse, the Board of Nursing will enter an order pursuant to Idaho Code §54-1413 revoking, suspending, limit, restrict or otherwise disciplining my license to practice nursing. The Board’s Order may include a civil penalty and/or the imposition of costs and attorney fees incurred by the Board in its investigation and prosecution of any claims or allegations against me. I hereby consent to the imposition of such discipline.

6. In surrendering my license to practice nursing for imposition of discipline by the Board, I am not making any admissions; however, I agree that the allegations against me, if the same had been proven true in a disciplinary hearing would constitute grounds for the imposition of a disciplinary action against me.

7. I understand that by surrendering my license to practice nursing, I am also surrendering all of the privileges associated with that licensure, until such time as I am again properly licensed.

8. I understand that to obtain a license to practice nursing in the state of Idaho, I must re-apply to the Idaho State Board of Nursing pursuant to the provisions of Title 54, Chapter 14, Idaho Code and all applicable rules and orders entered by the Board.

9. I understand and agree that any decision regarding reinstatement of my license is a discretionary decision for the Board. I understand and agree that the Board may rely on factors set forth in this document or other than those set forth in this document as grounds for denial of a petition for reinstatement.

10. I agree that there will be no rebate or refund, either in full or in part, of any sums previously made by me in connection with my licensure, including but not limited to payments of license application or renewal fees.

Name of Licensee: LISA ANN ANDERSON
License No.: N-22211
Address: 1425 Vista St. Gooding, Idaho 83330
Signature of Licensee: LISA ANN ANDERSON
Date: 12/22/10
Signature of Witness: JACQUELINE WARD
Date: 12/22/10

EXHIBIT A
In response to questions from nurses and their employers, the members of the Board of Nursing addressed the issue of ‘safety to practice’. In particular, nurses wanted to know if they should continue to practice while taking prescribed medications, including pain medications; whether they should refuse assignments to work overtime or extra shifts; whether they should consider retirement from practice when they have reached a certain chronological age.

The Board’s “Position on Safety to Practice” provides thoughtful direction to assist nurses and their employers in addressing these concerns.

IDaho BOARD OF NURSING  
POSITION ON SAFETY TO PRACTICE  
Adopted April 29, 2005

One essential element of safe nursing practice is a nurse’s functional ability: the competence and reliability with which a nurse is able to practice at any given time.

The board is aware that nurses sometimes experience situations that may compromise their ability to safely practice for either the short or long term. Some of these situations involve personal or job-related stress, sleep deprivation, the normal effects of aging, and episodic or persistent health conditions, some of which may require pain management or the use of maintenance-level prescribed medication. The list is not exclusive.

Whether a nurse should continue active nursing practice when that practice may be compromised depends upon the nurse’s ability to function safely and effectively. The assessment of functional ability is an individualized process that does not lend itself to application of a set format based on select elements. On the contrary, assessment of functional ability requires active consideration of all relevant factors, such as diagnosis, prescribed treatment and situational events, as well as an evaluation of the impact of those factors on the individual being assessed.

Although constant evaluation of one’s ability to safely and competently practice nursing is the responsibility of each individual nurse, the Board of Nursing remains the ultimate decision maker. In some instances, it may be necessary for the board to require objective physical and/or functional assessment, using reliable psychometric instruments and methods administered by qualified licensed professionals. For example, even though an individual nurse might perceive that he is capable of safe practice, a neuropsychiatric assessment, done at the Board’s request, may indicate functional impairment.

Licensed nurses are accountable for assuring that their actions and behaviors meet all applicable standards at all times. This requires constant awareness of the demands of the job and a continual process of evaluation and assessment in order to make sure that the nurse is fit to practice and competent to safely perform those functions that fall within the defined scope of nursing practice and for which the nurse has accepted responsibility. Nurses who practice while not fit to do so may be subject to disciplinary action by the board including, among others, license suspension or revocation, remedial measures, or monitored practice.
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**Send To**

LISA ANN ANDERSON  
1425 VISTA  
GOODING, ID. 83330