



00161284

BOARD OF VOCATIONAL NURSE EXAMINERS

333 GUADALUPE STREET, SUITE 3-400

AUSTIN, TEXAS 78701

512/305-8100

February 4, 2000

Kemberly Trigg
2210 Ridgedale Drive
Arlington, Texas 76013

Dear Ms. Trigg:

This office is in receipt of information alleging that, while employed as a Licensed Vocational Nurse with IHS of Benbrook in Benbrook, Texas, on or about October 8, 1999, you misappropriated medication (Soma) from Resident E.V. for your personal use.

Furthermore, it is alleged that you have become non-compliant with the Texas Peer Assistance Program for Nurses (TPAPN).

We have initiated an investigation into this matter to determine if you have violated any of the provisions of the Texas Occupations Code.

You are afforded this opportunity to respond to the allegations that have been made and to show that you have complied with all requirements of the law, i.e., the Texas Occupations Code, Chapter 302, for the retention of your license to practice vocational nursing in Texas.

We have enclosed Order Forms for a copy of the Texas Occupations Code and Rules and Regulations.

You may be interested in a provision of the Texas Occupations Code (302.410) for the Voluntary Surrender of a license. The return of the license along with your notarized statement that you no longer desire to be licensed will enable the Board to revoke your license without formal charges, notice or a hearing.

We are enclosing such an affidavit form for your consideration. To execute it, please sign the affidavit before a notary public and return it to the Board office, along with any vocational nursing license(s)/renewal form that you have in your possession.

One (1) year from the date the Board accepts the voluntary surrender, you may request a reinstatement hearing by submitting a letter to the Board office. You must be present at your reinstatement hearing, and the Board will require that you provide evidence of Rehabilitation/fitness to practice vocational nursing.

00161284

Thank you for your attention. If you have any questions concerning this matter, please contact the Investigation Division.

Sincerely,

Lynda Pringle

LYNDA G. PRINGLE
Investigator

LGP/lgp

Enclosures: Voluntary Surrender Affidavit and Order Forms

cc: Kemberly Trigg
5205 Helmick Avenue
Fort Worth, Texas 76107



00161284

BOARD OF VOCATIONAL NURSE EXAMINERS
333 GUADALUPE STREET, SUITE 3-400
AUSTIN, TEXAS 78701
512/305-8100

August 4, 2000

KEMBERLY CELESTE TRIGG
5205 HELMICK AVE.
FT. WORTH TX 76107

Dear Ms. Trigg:

You were previously advised that this office was investigating allegations contained in the enclosed Agreed Board Order.

The investigation has produced evidence of a violation of the Texas Occupations Code.

You are entitled to a formal Complaint, Notice of Hearing, and a Public Hearing held before an Administrative Law Judge with the State Office of Administrative Hearings in which you may present evidence and cross examine witnesses. You are also entitled to representation by an attorney. All hearings are held in Austin. However, at this time, you are offered an alternative to a formal hearing.

If the proposed Agreed Order is acceptable to you, please sign the Agreed Order before a Notary Public and return it (all pages) to our office as soon as possible. The Agreed Order does not become effective until it is accepted and endorsed by the Board of Vocational Nurse Examiners.

If it is not acceptable, or if we do not hear from you within twenty-one (21) days of the date of this letter, we will proceed with scheduling for a future hearing on this matter in Austin.

Sincerely,

Lynda Pringle

Lynda G. Pringle
Investigator

LGP/as

Enclosure: Agreed Board Order

(Certified Mail - RRR)

Z 582 970 306

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to	KEMBERLY CELESTE TRIGG
Street & Number	5205 HELMICK AVE.
Post Office, State, & ZIP Code	FT. WORTH TX 76107
Postage	\$

00161284

SEN

or top of envelope to

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 KEMBERLY CELESTE TRIGG
 5205 HELMICK AVE.
 FT. WORTH TX 76107

AUG 15 2000

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 KEMBERLY TRIGG 8/9/00

C. Signature Agent
 x Kemberly C. Trigg Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
 Z 582 970 306

LP/ ABO



BOARD OF VOCATIONAL NURSE EXAMINERS

333 GUADALUPE STREET, SUITE 3-400

AUSTIN, TEXAS 78701

512/305-8100

September 15, 2000

KEMBERLY TRIGG
5205 HELMICK AVE
FT WORTH TX 76107

Dear Ms. Trigg:

The enclosed Agreed Board Order has been ratified by the Board of Vocational Nurse Examiners, and it is now in effect. Your probation is subject to certain conditions as outlined in the Agreed Board Order.

The reports that are due from your nursing supervisor(s) and Chemical Dependency Support Group program sponsor on a monthly basis for the first six (6) months of probation are due on the following dates, to-wit:

October 11, 2000 – March 11, 2001

Thereafter and throughout the remainder of probation, reports are due by your nursing supervisor(s) and Chemical Dependency Support Group program sponsor on a quarterly basis on the following dates to-wit:

**June 11, 2001
September 11, 2001
December 11, 2001
March 11, 2002**

It is also stipulated that you pay a probation monitoring fee in the amount of thirty (\$30.00) dollars on a quarterly basis on the 15th of each quarter on the following dates to-wit:

**December 15, 2000, 2001
March 15, 2001, 2002
June 15, 2001
September 15, 2001**

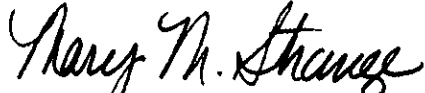
It is **your responsibility** to insure that the required reports are submitted to the Board office, on time, and without reminders.

Any period(s) of unemployment must be documented in writing and submitted directly to the Board office as stipulated in the Board Order. Non-compliance with this Order, or violation of the Texas Occupations Code, may result in a more severe sanction.

Kemberly Trigg
September 15, 2000
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If you have any questions concerning this matter, please contact the Enforcement Division.

Sincerely,

A handwritten signature in cursive script that reads "Mary M. Strange".

Mary M. Strange, BSN, RN, CNA
Executive Director

MMS/ch

Enclosure: Agreed order and Probation Documentation

BOARD OF VOCATIONAL
NURSE EXAMINERS

VS.

KEMBERLY CELESTE TRIGG

* STATE OF TEXAS
*
*
*
*
* COUNTY OF TRAVIS

AGREED BOARD ORDER

On this day came to be considered by the Board of Vocational Nurse Examiners the matter of vocational nurse license number 161284 held by KEMBERLY CELESTE TRIGG, hereinafter called Respondent.

By letter, the Board of Vocational Nurse Examiners sent preliminary notice to Respondent of its intent to take disciplinary action with respect to said license held by Respondent, as a result of a complaint and subsequent investigation. Said investigation produced evidence indicating that Respondent has engaged in unprofessional or dishonorable conduct that, in the Board's opinion, is likely to deceive, defraud, or injure the public, in violation of Texas Occupations Code, Chapter 302, Section 302.402 (a) (10), in the following manner:

I.

a. By letter dated December 22, 1999, the Board of Vocational Nurse Examiners received a referral from the Texas Peer Assistance Program for Nurses alleging that Respondent had become non-compliant with its program.

II.

a. Respondent was employed as a Licensed Vocational Nurse with I H S of Benbrook in Benbrook, Texas from about December 3, 1998 through about October 11, 1999.

b. While so employed with said facility, on or about October 8, 1999, Respondent diverted narcotic medication (SOMA) from Resident E.V. Respondent had complained of pain to another nurse on duty at about 2:00 p.m. and said nurse provided Respondent with the SOMA. Respondent acknowledged to her supervisor that she had ingested the medication. Narcotic logs indicate that one tablet of SOMA had been signed out at 2:00 p.m., however the medication administration records and the nurse's notes do not reflect that said medication had been administered to Resident E.V.

AUG 29 2000

AGREED BOARD ORDER
RE: KEMBERLY CELESTE TRIGG, LVN #161284
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c. Furthermore, Respondent was responsible for discrepancies in the administration and documentation of narcotics (SOMA) to Resident E.V. The narcotic log reflects that Respondent signed out for one tablet of SOMA at 0600, but she failed to document in Resident E.V.'s medication administration record or nurse's notes that said resident received the medication.

By Respondent's signature on this Order, Respondent neither admits nor denies the truth of the matters previously set out in this Order with respect to the above-mentioned investigation. By Respondent's signature on this Order, Respondent acknowledges that they have read and understood this Order and have approved it for consideration by the Board.

By their notarized signature on this Order, Respondent does hereby waive the right to a formal Complaint, Notice of Hearing and a Public Hearing held before an Administrative Law Judge with the State Office of Administrative Hearings, and to judicial review of this disciplinary action. Notice of this disciplinary action will appear in the Board's newsletter sent to Texas employers.

ORDER OF THE BOARD

NOW THEREFORE, IT IS ORDERED that license number 161284, heretofore issued to KEMBERLY CELESTE TRIGG to practice vocational nursing in the State of Texas be, and the same is hereby suspended, with said suspension stayed and placed on probation for a period of eighteen (18) months.

The probation of said license is subject to the following stipulations, to wit:

1. That if Respondent's place of employment, name, address or telephone number changes, Respondent is to notify the Board office immediately, or no later than ten (10) days after said change has occurred. Said notification shall be in the form of a written letter or report.
2. That Respondent shall comply with Federal, State, and local laws, and all the provisions of the Texas Occupations Code, Chapter 302 and Rules and Regulations of the Board.
3. That by copy of this Board Order, Respondent shall provide notice of Board disciplinary action to his/her immediate nursing supervisor(s) and Director(s) of Nursing, throughout the term of probation.

AGREED BOARD ORDER

RE: KEMBERLY CELESTE TRIGG, LVN #161284

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4. That Respondent shall be responsible for causing his/her immediate nursing supervisor(s) to submit satisfactory reports directly to the Board office on a monthly basis for the first six (6) months of probation. Thereafter, and throughout the remainder of said probation, Respondent shall be responsible for causing his/her immediate nursing supervisor(s) to submit satisfactory reports directly to the Board office on a quarterly basis. The receipt of an unfavorable and/or untimely report shall be considered a violation of probation.
5. That any period(s) of nursing unemployment must be documented in writing by Respondent and submitted to the Board office, as provided in Stipulation No. four (4).
6. That Respondent shall work only under the supervision of a licensed medical professional (MD, RN, LVN) who is physically present on the work premises during Respondent's shift assignment(s), throughout the term of the probation.
7. That Respondent shall not be employed by a nurse registry, temporary nurse employment agency, home health agency, or as a private duty nurse, throughout the term of probation.
8. That Respondent shall not be the only licensed medical professional in the facility throughout the term of probation.
9. That Respondent shall not have access to mood altering medications in the workplace setting during the first six (6) months of probation in which Respondent is employed as a Licensed Vocational Nurse.
10. That Respondent shall attend weekly meetings of a Chemical Dependency Support Group (AA/NA), and shall be responsible for causing his/her program sponsor to submit satisfactory reports directly to the Board office on a monthly basis for the first six (6) months of probation. Thereafter, and throughout the remainder of said probation, Respondent shall be responsible for causing his/her program sponsor to submit satisfactory reports directly to the Board office on a quarterly basis. The receipt of an unfavorable and/or untimely report shall be considered a violation of probation.
11. That Respondent shall and hereby agrees to remain free of alcohol and all unprescribed controlled substances. Any controlled or legend medication must be prescribed by a physician knowledgeable about the disease of addiction, as well as Respondent's history, and it is incumbent upon Respondent to insure such physician knowledge. In all such cases, the prescribed drugs must be verified in writing to the Board by the prescribing physician.
12. That Respondent shall submit to monthly blood alcohol drug screen(s) upon demand of the Board staff for the first six (6) months of probation. Thereafter, and throughout the remainder of said probation, Respondent shall submit to random urine drug screen(s) upon demand of the Board staff throughout the term of probation. Respondent shall submit to a drug screening panel consisting of the following: Alcohol, Amphetamines, Barbiturates, Benzodiazepines, Cannabinoids, Cocaine, Hydrocodone, Meperidine, Opiates, Propoxyphene, PCP, Morphine, Codeine, Methadone, and Methaqualone. Said screen(s) shall be properly monitored with adherence to chain of custody procedures. A positive result shall be legally confirmed by Gas Liquid Chromatography/Mass Spectrometry (GCMS). The results of said screen(s) shall be submitted directly to the Board office by the laboratory. The expense of said screen(s) shall be borne by Respondent. That a report of a positive drug screen or unprescribed controlled substances shall be considered a violation of probation.

AGREED BOARD ORDER
 RE: KEMBERLY CELESTE TRIGG, LVN #161284
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13. That Respondent shall provide the Board a telephone number by which Respondent may be contacted between the hours of 8:00 a.m. and 5:00 p.m. on weekdays. Respondent must maintain with the Board, during the term of this probation, a current telephone number in order for the Board to request random blood alcohol and urine drug screens, as provided in Stipulation No. twelve (12). An inability to contact Respondent by telephone to request said required drug screens shall be considered a violation of probation.

14. That Respondent shall pay a Probation Monitoring fee in the amount of thirty (\$30.00) dollars in the form of a cashier's check or money order, payable to the Board of Vocational Nurse Examiners. Said fee shall be paid quarterly, due on the 15th of each quarter, commencing the quarter following the date of the Board's endorsement of the Order, and continuing thereafter until the successful completion of Respondent's probation. Said fee shall be sent to the Board office, addressed to the "Board of Vocational Nurse Examiners, 333 Guadalupe, Suite 3-400, Austin, TX 78701". Failure by Respondent to make any quarterly payment on time shall constitute a violation of probation.

This Agreed Order shall not be effective or take effect and become enforceable in accordance with its terms until endorsed by a majority of the Board present and voting, at its next regularly called session.

Dated this the 21st day of August, 2000.

Kemberly C. Trigg
 Signature of Respondent

3205 Helmick Ave
 Current Address

Fort Worth, Tex 76107
 City, State and Zip

817, 569-8472
 Area Code and Telephone Number

The State of Texas
 County of Tarrant

Before me, the undersigned authority, on this day personally appeared KEMBERLY CELESTE TRIGG, who being duly sworn by me stated that he or she executed the above for the purpose therein contained, and that he or she understood same.

AGREED BOARD ORDER
RE: KEMBERLY CELESTE TRIGG, LVN #161284
PAGE 5

SWORN TO AND SUBSCRIBED before me on this the 21 day of August,
2000.



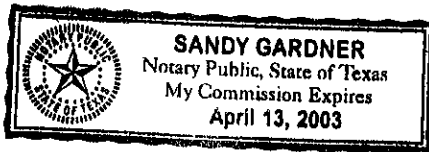
Christa Hedric

NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS
My Commission Expires 10-28-00

Mary M. Strange

Mary M. Strange, RN
Agent for the Board of
Vocational Nurse Examiners

SWORN TO AND SUBSCRIBED before me, the undersigned authority, on this the 8th
day of September, 2000.



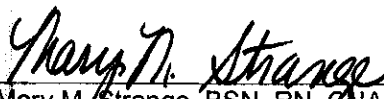
Sandy Gardner

NOTARY PUBLIC IN AND FOR
THE STATE OF TEXAS

BOARD ORDER
RE: KEMBERLY CELESTE TRIGG, LVN #161284
PAGE: 6

WHEREFORE, PREMISES CONSIDERED, the Board of Vocational Nurse Examiners for the State of Texas does hereby ratify and adopt the Agreed Board Order, notarized on the 21st day of August, 2000 by Respondent, license number 161284 and that Said Order is Final.

Effective this 11th day of September, 2000.



Mary M. Strange, BSN, RN, CNA
Executive Director
On Behalf of Said Board

BOARD ORDER

RE: KEMBERLY CELESTE TRIGG, LVN #161284

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CERTIFICATE OF SERVICE

I hereby certify that on the 15th day of September, 2000, a true and correct copy of the foregoing **BOARD ORDER** was served by placement in the U.S. Mail, first class, and addressed to the following person(s):

KEMBERLY CELESTE TRIGG
5205 HELMICK AVE
FT WORTH, TX 76107



Mary M. Strange, BSN, RN, CNA
Executive Director

Agent for the Board of Vocational Nurse Examiners



BOARD OF VOCATIONAL NURSE EXAMINERS
333 GUADALUPE STREET, SUITE 3-400
AUSTIN, TEXAS 78701
512/305-8100

March 15, 2002

KEMBERLY TRIGG
5205 HELMICK AVE
FT WORTH TX 76107

Dear Ms. Trigg:

You have successfully completed your term of probation as stipulated by the Board of Vocational Nurse Examiners.

All pertinent information will remain in your permanent records. We urge you in the future to promote and uphold the ethical standards a Licensed Vocational Nurse should practice.

If you have any questions concerning this matter, please do not hesitate to contact our office.

Sincerely,

A handwritten signature in cursive script that reads "Carolyn Hudson".

Carolyn Hudson
Probation Monitor, Enforcement Division

/ch