



I do hereby certify this to be a complete, accurate, and true copy of the document which is on file or is of record in the offices of the Texas Board of Nursing.
Katherine A. Thomas
Executive Director of the Board

BEFORE THE TEXAS BOARD OF NURSING

In the Matter of Registered Nurse
License Number 717975
issued to HEAVEN HAMMURABI-BOYD

§ AGREED
§
§ ORDER

On this day the Texas Board of Nursing, hereinafter referred to as the Board, considered the matter of HEAVEN HAMMURABI-BOYD, Registered Nurse License Number 717975, hereinafter referred to as Respondent.

Information received by the Board produced evidence that Respondent may have violated Section 301.452(b)(10) & (13), Texas Occupations Code. Respondent waived informal conference, notice and hearing, and agreed to the entry of this Order offered on September 24, 2007, by Katherine A. Thomas, MN, RN, Executive Director, subject to ratification by the Board.

FINDINGS OF FACT

1. Prior to the institution of Agency proceedings, notice of the matters specified below in these Findings of Fact was served on Respondent and Respondent was given an opportunity to show compliance with all requirements of the law for retention of the license.
2. Respondent waived informal conference, notice and hearing, and agreed to the entry of this Order.
3. Respondent is currently licensed to practice professional nursing in the State of Texas.
4. Respondent received a Baccalaureate Degree in Nursing from Columbia University, New York, New York, on February 8, 1995. Respondent was licensed to practice professional nursing in the State of Texas on June 28, 2005.
5. Respondent's complete professional nursing employment history is unknown.

- 6. At the time of the incident in Findings of Fact Numbers Seven (7) and Eight (8), Respondent was employed as a Nursing Supervisor with Sheridan on Rock Prairie, College Station, Texas, and had been in this position for three (3) months.
- 7. On or about August 10, 2006, while employed with Sheridan on Rock Prairie, College Station, Texas, Respondent failed to institute the appropriate nursing intervention required to stabilize Resident JB (who was a full code) when receiving report from LVN JS that the resident was found non-responsive. Instead of immediately initiating cardiopulmonary resuscitation (CPR) or the emergency activation system, Respondent pronounced the resident's death. Respondent's conduct deprived the resident of emergent medical intervention which may have prevented the resident's demise.
- 8. While employed with Sheridan on Rock Prairie, College Station, Texas, Respondent accepted a nursing assignment which may have resulted in unsafe patient care described in Finding of Fact Number Seven (7). Respondent admitted that she did not have current CPR certification.

CONCLUSIONS OF LAW

- 1. Pursuant to Texas Occupations Code, Sections 301.451-301.555, the Board has jurisdiction over this matter.
- 2. Notice was served in accordance with law.
- 3. The evidence received is sufficient to prove violations of Section 301.452(b)(10) & (13), Texas Occupations Code, 22 TEX. ADMIN. CODE §217.11(1)(B) & (T) and §217.12(1)(E).
- 4. The evidence received is sufficient cause pursuant to Section 301.452(b), Texas Occupations Code, to take disciplinary action against Registered Nurse License Number 717975, heretofore issued to HEAVEN HAMMURABI-BOYD, including revocation of Respondent's license to practice professional nursing in the State of Texas.

ORDER

IT IS THEREFORE AGREED and ORDERED, subject to ratification by the Texas Board of Nursing, that RESPONDENT SHALL receive the sanction of a REPRIMAND WITH STIPULATIONS, and RESPONDENT SHALL comply in all respects with the Nursing Practice Act, Revised Civil Statutes of Texas as amended, Texas Occupations Code, §§301.001

et seq., the Rules and Regulations Relating to Professional Nurse Education, Licensure and Practice, 22 TEX. ADMIN. CODE §211.01 *et seq.* and this Order.

IT IS FURTHER AGREED and ORDERED that this Order SHALL be applicable to Respondent's multistate licensure privilege, if any, to practice professional nursing in compact states.

IT IS FURTHER AGREED and ORDERED that while Respondent's license is encumbered by this Order, Respondent may not work outside the State of Texas pursuant to a multistate licensure privilege without the written permission of the Texas Board of Nursing and the Board of Nursing in the party state where Respondent wishes to work.

IT IS FURTHER AGREED that:

(1) RESPONDENT SHALL deliver the wallet-sized license issued to HEAVEN HAMMURABI-BOYD, to the office of the Texas Board of Nursing within ten (10) days from the date of ratification of this Order for appropriate notation.

(2) RESPONDENT SHALL, within one (1) year of entry of this Order, successfully complete a course in Texas nursing jurisprudence and ethics. RESPONDENT SHALL obtain Board approval of the course prior to enrollment only if the course is not being offered by a pre-approved provider. Home study courses and video programs will not be approved. In order for the course to be approved, the target audience shall include nurses. It shall be a minimum of six (6) contact hours in length. The course's content shall include the Nursing Practice Act, standards of practice, documentation of care, principles of nursing ethics, confidentiality, professional boundaries, and the Board's Disciplinary Sanction Policies regarding Sexual Misconduct, Fraud, Theft and Deception, Nurses with Chemical Dependency, and Lying and Falsification. Courses focusing on malpractice issues will not be accepted.

RESPONDENT SHALL CAUSE the sponsoring institution to submit a Verification of Course Completion form, provided by the Board, to the Office of the Board to verify RESPONDENT's successful completion of the course. This course shall be taken in addition to any other courses stipulated in this Order, if any, and in addition to any continuing education requirements the Board has for relicensure. *Board-approved courses may be found at the following Board website address:*

<http://www.bon.state.tx.us/about/stipscourses.html>

(3) RESPONDENT SHALL, within one (1) year of entry of this Order, successfully complete a course in "Sharpening Critical Thinking Skills," a 3.6 contact hour online program provided by the National Council of State Boards of Nursing (NCSBN) Learning Extension. In order to receive credit for completion of this program, RESPONDENT SHALL SUBMIT the continuing education certificate of completion for this program to the Board's office, to the attention of Monitoring. This course is to be taken in addition to any continuing education requirements the Board may have for relicensure. Information regarding this workshop may be found at the following web address:

<http://www.learningext.com/products/generalce/critical/ctabout.asp>

(4) RESPONDENT SHALL, within sixty (60) days of entry of this Order, successfully complete a course in Basic Cardiopulmonary Life Support for Healthcare Providers. RESPONDENT SHALL obtain Board approval of the course and instructor prior to enrollment. Home study courses and video programs will not be approved. In order for the course to be approved, the target audience shall include Nurses. The course shall be a minimum of eight (8) contact hours in length. The course's content shall include: Adult, Infant, and Child 1- and 2-Rescuer CPR; Adult, Infant, and Child Foreign Body Airy Obstruction for both responsive and unresponsive victims; and Adult Automated External Defibrillation. In order to receive credit

for completion of this workshop, RESPONDENT SHALL obtain the Verification of Course Completion form from the Board's website, <ftp://www.bne.state.tx.us/i17.pdf>, and SHALL SUBMIT the Verification of Course Completion form to the Board's office, to the attention of Monitoring, after having the form completed and signed by the course instructor. RESPONDENT SHALL also submit a front and back copy of the course completion card along with the Verification of Course Completion form. This course shall be taken in addition to any other courses stipulated in this Order, if any, and in addition to any continuing education requirements the Board has for relicensure.

IT IS FURTHER AGREED, SHOULD RESPONDENT PRACTICE AS A REGISTERED NURSE IN THE STATE OF TEXAS, RESPONDENT WILL PROVIDE DIRECT PATIENT CARE AND PRACTICE IN A HOSPITAL, NURSING HOME, OR OTHER CLINICAL SETTING AND RESPONDENT MUST WORK IN SUCH SETTING A MINIMUM OF SIXTY-FOUR (64) HOURS PER MONTH UNDER THE FOLLOWING STIPULATIONS FOR TWO (2) YEARS OF EMPLOYMENT. THE LENGTH OF THE STIPULATION PERIOD WILL BE EXTENDED UNTIL SUCH TWENTY-FOUR (24) MONTHS HAVE ELAPSED. PERIODS OF UNEMPLOYMENT OR OF EMPLOYMENT THAT DO NOT REQUIRE THE USE OF A REGISTERED NURSE (RN) LICENSE WILL NOT APPLY TO THIS STIPULATION PERIOD:

(5) RESPONDENT SHALL notify each present employer in nursing of this Order of the Board and the stipulations on RESPONDENT's license. RESPONDENT SHALL present a complete copy of this Order and all Proposals for Decision issued by the Administrative Law Judge, if any, to each present employer within five (5) days of receipt of this Order. RESPONDENT SHALL notify all future employers in nursing of this Order of the Board and the stipulations on

RESPONDENT's license. RESPONDENT SHALL present a complete copy of this Order and all Proposals for Decision issued by the Administrative Law Judge, if any, to each future employer prior to accepting an offer of employment.

(6) RESPONDENT SHALL CAUSE each present employer in nursing to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within ten (10) days of receipt of this Order. RESPONDENT SHALL CAUSE each future employer to submit the Notification of Employment form, which is provided to the Respondent by the Board, to the Board's office within five (5) days of employment as a nurse.

(7) For the first year of this Order, RESPONDENT SHALL be directly supervised by a Registered Nurse. Direct supervision requires another professional nurse to be working on the same unit as RESPONDENT and immediately available to provide assistance and intervention. RESPONDENT SHALL work only on regularly assigned, identified and predetermined unit(s). The RESPONDENT SHALL NOT be employed by a nurse registry, temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-employed or contract for services. Multiple employers are prohibited.

(8) For the remainder of the stipulation period, RESPONDENT SHALL be supervised by a Registered Nurse who is on the premises. The supervising nurse is not required to be on the same unit or ward as RESPONDENT, but should be on the facility grounds and readily available to provide assistance and intervention if necessary. The supervising nurse shall have a minimum of two (2) years experience in the same or similar practice setting to which the Respondent is currently working. RESPONDENT SHALL work only regularly assigned, identified and predetermined unit(s). RESPONDENT SHALL NOT be employed by a nurse registry, temporary nurse employment agency, hospice, or home health agency. RESPONDENT SHALL NOT be self-

employed or contract for services. Multiple employers are prohibited.

(9) RESPONDENT SHALL CAUSE each employer to submit, on forms provided to the Respondent by the Board, periodic reports as to RESPONDENT's capability to practice nursing. These reports shall be completed by the Registered Nurse who supervises the RESPONDENT. These reports shall be submitted by the supervising nurse to the office of the Board at the end of each three (3) months for two (2) year(s) of employment as a nurse.

IT IS FURTHER AGREED, that upon full compliance with the terms of this Order, RESPONDENT SHALL be issued an unencumbered license and multistate licensure privileges, if any, to practice professional nursing in the State of Texas.

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RESPONDENT'S CERTIFICATION

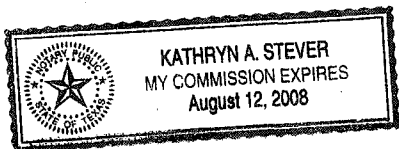
I understand that I have the right to legal counsel prior to signing this Agreed Order. I have reviewed this Order. I neither admit nor deny the violations alleged herein. By my signature on this Order, I agree to the Findings of Fact, Conclusions of Law, Order, and any conditions of said Order, to avoid further disciplinary action in this matter. I waive judicial review of this Order. I understand that this Order is subject to ratification by the Board. When this Order is ratified, the terms of this Order become effective, and a copy will be mailed to me. I understand that if I fail to comply with all terms and conditions of this Order, I will be subject to investigation and disciplinary sanction, including revocation of my license to practice professional nursing in the State of Texas, as a consequence of my noncompliance.

Signed this 14th day of February, 2008.

Heaven Hammurabi-Boyd
HEAVEN HAMMURABI-BOYD, Respondent

Sworn to and subscribed before me this 14th day of February, 2008.

SEAL



Kathryn A Stever

Notary Public in and for the State of Texas

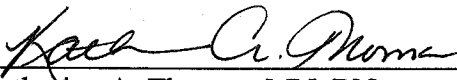
Approved as to form and substance.

Marvin B Martin
Marvin B. Martin., Attorney for Respondent

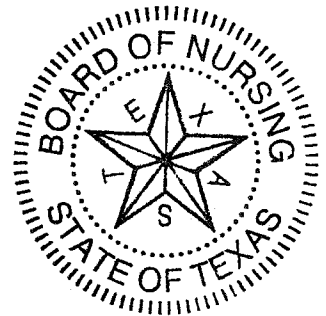
Signed this 14 day of February, 2008

WHEREFORE, PREMISES CONSIDERED, the Texas Board of Nursing does hereby ratify and adopt the Agreed Order that was signed on the 14th day of February, 2008, by HEAVEN HAMMURABI-BOYD, Registered Nurse License Number 717975, and said Order is final.

Effective this 18th day of March, 2008.



Katherine A. Thomas, MN, RN
Executive Director on behalf of said Board



TEXAS BOARD OF NURSING
333 GUADALUPE STREET, SUITE 3-460
AUSTIN, TEXAS 78701
(512) 305-6827

NOTICE

Be advised that the following information relates to the monitoring of your compliance with the enclosed Board Order:

Read your Board Order carefully. **Return your wallet-sized license to this office immediately so that it may receive the appropriate coding.** A new, stipulated license will be mailed to you within 7-10 working days of the Board's receipt of your current license.

All required courses must be completed within one (1) year from the date of the order regardless if your license is in delinquent status or current.

You are responsible for ensuring the appropriate forms are mailed to the Board's office within the correct time frame. You are also responsible for ensuring that the appropriate personnel at your place of employment have been notified of the Order and that you have provided your employer with a copy of the Order.

A Notification of Employment form is enclosed, for you to give to your employer for submission to this office if you are required to cause your employer to submit periodic reports. This form is only to be used by employers who employ you as a registered nurse in the State of Texas.

1. If you are currently employed as a registered/vocational nurse, you are required to cause your current employer to submit the Notification of Employment form to our office within ten (10) days of your receipt of the enclosed Board Order.
2. If you are not currently employed as a registered/vocational nurse, you will be required to cause your potential employer to submit the Notification of Employment form to our office within five (5) days of employment as a registered nurse.
3. If you change employers during the term of your Order, you will be required to cause your new employer to submit a new Notification of Employment form to this office within five (5) days of your new employment as a registered nurse.

Once this office receives the completed Notification of Employment form, you will be sent your first set of report forms to be used to document your compliance with the stipulations of your Board Order. You will also be informed of the date on which your first set of reports will be due in the Board's office.

This office works on due dates of either the 15th or the last day of any given month. **All reports will only be accepted if received in this office within two weeks prior to, or two weeks immediately following the due date. Also, please be aware that all reports, except for Support Group attendance, must be submitted directly from the individual completing the report.**

You will be credited only for reports verifying your compliance with your stipulations during periods of time in which you are employed as a registered/vocational nurse. Quarterly reports will only be accepted if you have been working with the same employer for a full three (3) months. Employment for one (1) or two (2) months will not count towards your monitoring period.

The effective date of the Order is the date the Order was ratified by the Board. That date may be found on the Executive Director's signature page contained in your Order.

You will be responsible for compliance with the Order of the Board without further notice from our office. **Be aware that any failure to comply with the terms of the Order may result in another investigation and possible further disciplinary action being taken against your license (including possible revocation of your license) due to your non-compliance.** Review the enclosed Board Order carefully. If you are a registered nurse and have any questions, contact Diane E. Burell, Investigator. If you are a vocational nurse and have any questions, contact Carolyn Hudson, Probation Monitor, at (512) 305-7667.

Texas Board of Nursing
333 Guadalupe Street, Suite 3-460
Austin, Texas 78701
(512) 305-6827

NOTIFICATION OF EMPLOYMENT

Regarding: _____

License Number: _____

This is to certify that the above identified nurse has been employed by

_____ which is a _____
Name of Facility *Type of Facility*

in the position of _____ since the date of _____.

I have received a complete copy of the Order of the Board and am aware of the stipulations placed on this license by the Texas Board of Nursing. **I agree to notify the Board's office and provide information to the Board regarding this nurse's resignation or termination.**

Supervisor's Signature: _____ *Date:* _____

Title: _____

Facility Name and Address: _____

Telephone #: _____

If the Board's Order requires that the nurse cause his/her employer to submit a periodic Nursing Performance Evaluation, and that Evaluation will be signed by a nurse other than the above Supervisor, please list that individual's name and title below.

Name: _____

Title: _____

For Registered Nurses: Return to the attention of Diane E. Burell, Investigator, at the above address
For Vocational Nurses: Return to the attention of Carolyn Hudson, Probation Monitor, at the above address