

**VIRGINIA BOARD OF NURSING  
BUSINESS MEETING  
AGENDA (SECOND MAILING)**

Department of Health Professions – Perimeter Center  
9960 Mayland Drive, Conference Center 201 – **Board Room 2**  
Henrico, Virginia 23233

***DHP Mission** – the mission of the Department of Health Professions is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.*

**Tuesday, July 21, 2026 at 9:00 A.M. – Quorum of the Board**

**CALL TO ORDER:** Carol Cartte, RN, BSN; President

**ESTABLISHMENT OF A QUORUM**

**PUBLIC COMMENT**

**Please note** - Public Comment is not an opportunity to:

- Engage the Board in a discussion.
- Comment on regulatory actions for which the public comment period is closed.
- Address an investigation, a disciplinary proceeding or a closed case.

In order to allow ample time for the Board to conduct its business, the Board asked that the public limit your comment to 3-5 minutes.

**ANNOUNCEMENT**

- **Board Member Update**
  - **TBD.**
- **Staff Update:**
  - **TBD.**

**A. UPCOMING MEETINGS and HEARINGS:**

- The Education Informal Conference Committee is scheduled for August 18, 2026, at 9 am in Board Room 4.
- The NLC Annual Meeting is scheduled on August 18, 2026 in Chicago. Ms. Morris will attend as Commissioner for Virginia Board of Nursing.
- NCSBN Annual Meeting is scheduled for August 19-21, 2026 in Chicago. Ms. Cartte, Ms. Morris, Ms. Glazier, Ms. Hardy and Ms. Wilmoth will attend.

**REMINDER** of the Upcoming Special Conference Committee (SCC) Dates:

**August 2026:**

- SCC-B – August 5, 2026 → Cox and Valenta
- SCC-D – August 11, 2026 → Cartte and Kitt
- SCC-C – August 17, 2026 → Zehr and Webb-Jones
- SCC-A – August 21, 2026 → Davis and **TBD**

**REMINDER** of Formal Hearings:

- **Tuesday, August 24, 2026, in Board Room 4** → Cartte, Nunez, Ware, Webb-Jones and Zehr
- **Thursday, October 29, 2026, in Board Room 4** → Cartte, Davis, Gulley, Kitt, Parke, Valenta and Webb-Jones

• **Nursing and Nurse Aide Education Program Training Sessions:**

- Review of the Application Process to Receive Approval to Establish a Nurse Aide Education Program Seminar is scheduled **VIRTUALLY** for September 16, 2026, 1 pm to 3 pm.

**REVIEW OF THE AGENDA:**

- Additions, Modifications
- Adoption of a Consent Agenda
- **CONSENT AGENDA**

*B1	May 18, 2026	Formal Hearings
*B2	May 19, 2026	Business Meeting
*B3	May 20, 2026	Board of Nursing Officer Meeting
*B4	May 20, 2026	Panel A – Formal Hearings
*B5	May 20, 2026	Panel B - Formal Hearings
*B6	May 21, 2026	Formal Hearings
*B7	May 28, 2026	Telephone Conference Call
*B8	June 11, 2026	Telephone Conference Call
*B9	June 25, 2026	Telephone Conference Call
**B10	June 30, 2026	Formal Hearings
	July 9, 2026	Telephone Conference Call

\*\*C1 - Board of Nursing Monthly Tracking Log as of May 31, 2026

\*C2 - Agency Subordinate Recommendation Tracking Log

C3 - Executive Director Report

- May 18, 2026 NCSBN BOD President Letter

C4 – HPMP Quarterly Report – April 1 – June 31, 2026

\*C5 - The Committee of the Joint Boards of Nursing and Medicine Business Meeting on June 17, 2026

\*C6 - The Committee of the Joint Boards of Nursing and Medicine Formal Hearing minutes on June 17, 2026

\*C7 - NCSBN Discipline Case Management Conference on May 27-28, 2026, in Rosemont, IL - Ms. Dewey

and Ms. Davis

**DIALOGUE WITH DHP DIRECTOR – Dr. Brown**

**B. DISPOSITION OF MINUTES – None**

**C. REPORTS**

- DHP Quarterly Performance Measurement, Q4 2022 – Q4 2026 – **FYI only**

**D. OTHER MATTERS:**

- Board Counsel Update (**verbal report**)

**E. EDUCATION:**

- Nurse Aide, Medication Aide and Nursing Education Program Updates – **Ms. Wilmoth (verbal report)**
- **\*\*E2 - Medication Aide Exam Length – Ms. Wilmoth**

**F. REGULATIONS/LEGISLATION– Ms. Barrett/Mr. Novak**

- **F1 – Chart of Regulatory Actions**
- **Periodic Review of Regulations for RMA**

**BOARD MEMBER DEVELOPMENT**

- **Formal Hearing Practices and Procedures**

**G. CONSIDERATION OF CONSENT ORDERS**

- **TBD**

**12:00 P.M. – 12:45 P.M –LUNCH**

Possible Summary Suspension Considerations

- **TBD**

**1:30 P.M. – CONSIDERATION OF RECOMMENDATIONS**

**Presiding:** Carol Cartte, RN, BSN; President  
**Other Members:** Victoria Cox, DNP, RN  
Tauna Gulley, PhD, FNP-BC, CNE  
Jeanelle Webb-Jones, MSN, RN  
Jodi Zehr, RN

**\*E1 – Education Special Conference Committee June 17, 2026 Minutes**

**CONSIDERATION OF JUNE 17, 2026 EDUCATION SPECIAL CONFERENCE COMMITTEE RECOMMENDATIONS:**

- **\*E1a** - Medical Learning Center, Fairfax, Medication Aide Training Program, 0030000234, case # 256803

**CONSIDERATION OF AGENCY SUBORDINATE RECOMMENDATIONS – Panel of the Board**

1	*Steven Paul Barnabei-Cooper, LPN	2	*April Marie Lightsey, RN
3	*Kenyeta Nicole Morris, CNA	4	*Trevia Marie Garner, RN
5	*Kimberly Ann Moody, RN	6	*Jennifer Gayle Heidemann, LPN
7	*Evelyn Appiah Agyekum, CNA	8	*Evelyn Appiah Agyekum, RN
9	*Nabin Oli, RN	10	*Caleb Coleson Witt, LPN
11	*Latoya Gray Wilson, LPN	12	*Jasmine Dae Wright, LPN
13	*Jyl Mary Bodenstein Carter, RN	14	*Jeremy Sheperd, RN
15	*Jennifer Alicia Miles, RN	16	*Britny Lynn Burgess, RMA Applicant
17	*Sierra Layne Weaver, RN	18	*April Lee Killmon, LPN
19	*Gina Allen, CNA	20	*Jamisha Latrice Seward, RMA
21	*Deena R. Truslow, LPN	22	*Shemica Mo’Shae Scott, CNA
23	*Jaysen Witynski, CNA Applicant	24	*Rebecca Milligan, CNA
25	*Auria M. Thomas, CNA	26	*Ashley Dawn Litten, CNA
27	*Armanda Johnson, CNA Applicant	28	*Rosalyn Yvette Johnson, CNA
29	*Danicqua Knox, CNA Applicant	30	*Victoria Edwards, RN
31	*Amelia G. Perfater, CNA	32	**Jayme Nicole Welly, RN
33	**Jennifer Bland Mamner Garabedian, RN	34	**Rochelle Gregory, RMA Applicant
35	**Brittany Farrington, CNA	36	**Crystal Hope Lancaster, RN
37	**Ray White, CNA	38	**Christy Tonya Matney, LPN
39	**Ashley Marie Childress, RN	40	**Angela Worley Pickral, RN
41	**Esther Onwaku Ajijie, RN Applicant	42	**Bridget Marie Alexander, RN
43	**Amber Marie Fortenberry, RMA	44	**Veronica Kay Blackwell, RMA Applicant
45	**Kara B. Hite, CNA	46	**Kaitlyn J. Weenick, CNA

**MEETING DEBRIEF:**

- What went well
- What needs improvement

**ADJOURNMENT OF BUSINESS AGENDA**

(\*1<sup>st</sup> mailing - 7/1) (\*\*2<sup>nd</sup> mailing - 7/8) (\*\*\*)3<sup>rd</sup> mailing – 7/15)

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**VIRGINIA BOARD OF NURSING**  
**FORMAL HEARINGS**  
**May 18, 2026**

**B1**

**TIME AND PLACE:** The meeting of the Virginia Board of Nursing was called to order at 9:06 A.M., on May 18, 2026, in Board Room 4, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

**BOARD MEMBERS  
PRESENT:**

Carol Cartte, RN, BSN; **President**  
Victoria Cox, DNP, RN  
Pamela Davis, LPN  
Yesenia Nunez, MSN, FNP-BC  
Helen Parke, DNP, FNP-BC  
Jodi Zehr, RN

**STAFF PRESENT:**

Randall Mangrum, DNP, RN; Deputy Executive Director for Advanced Practice  
Ann Hardy, MSN, RN; Deputy Executive Director  
Monique Davis, MPH, MB, BSN, Discipline Case Manager  
Tamika Claiborne, BS, Senior Discipline Specialist

**OTHERS PRESENT:**

Sara A. Blose, Senior Assistant Attorney General  
Students from Riverside College of Health Sciences, RN Program  
Students from South University, Richmond, RN Program  
Students from Gloucester High School PCT/Nurse Aide Program

**ESTABLISHMENT  
OF A PANEL:**

With six members of the Board present, a panel was established.

**FORMAL HEARINGS:**

**Sadie Mitchell, RMA Reinstatement Applicant 0031-016553**

Ms. Mitchell appeared.

Avi Efreom, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blose was legal counsel for the Board. Juan Ortega, court reporter with Ortega International Reporting, recorded the proceedings.

Katie Land, Senior Investigator, Enforcement Division, was present and testified.

**CLOSED MEETING:** Ms. Zehr moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 10:11 A.M., for the purpose of deliberation to reach a decision in the matter of **Sadie Mitchell**. Additionally, Ms. Zehr moved that Dr. Mangrum, Ms. Hardy, Ms. Davis, Ms. Claiborne, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Dr. Cox and carried unanimously.

**RECONVENTION:** The Board reconvened in open session at 10:51 A.M.

Ms. Zehr moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Dr. Cox and carried unanimously.

**ACTION:** Ms. Davis moved that the Board deny **Sadie Mitchell's** application for reinstatement of her registration to practice as a medication aide in the Commonwealth of Virginia. The motion was seconded by Dr. Parke and carried unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

**RECESSED:** The Board recessed at 10:52 A.M.

**RECONVENTION:** The Board reconvened at 11:09 A.M.

**FORMAL HEARINGS:** **Susan Kim, RN** **Maryland License # R244978**  
**With Multistate Privileges**

Ms. Kim appeared.

Amy Weiss, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blose was legal counsel for the Board. Juan Ortega, court reporter with Ortega International Reporting, recorded the proceedings.

Sarah Mazzeo, RN and Rebecca Adams, RN, were present and testified. Erica Besore, RN testified via telephone.

CLOSED MEETING: Ms. Zehr moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 12:19 P.M., for the purpose of deliberation to reach a decision in the matter of **Susan Kim**. Additionally, Ms. Zehr moved that, Dr. Mangrum, Ms. Hardy, Ms. Davis, Ms. Claiborne, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Dr. Cox and carried unanimously.

RECONVENTION: The Board reconvened in open session at 12:40 P.M.

Ms. Zehr moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Dr. Cox and carried unanimously.

ACTION: Ms. Davis moved that the Board impose terms on the license of **Susan Kim** to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Nunez and passed unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

RECESSED: The Board recessed at 12:42 P.M.

RECONVENTION: The Board reconvened at 2:02 P.M.

FORMAL HEARINGS: **Oyindamola Ogunlana, RN** **0001-303634**

Ms. Ogunlana did not appear.

Avi Efreom, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blose was legal counsel for the Board. Juan Ortega, court reporter with Ortega International Reporting, recorded the proceedings.

Courtney Merkel, Senior Investigator, Enforcement Division, was present and testified.

- CLOSED MEETING: Ms. Zehr moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 2:08 P.M., for the purpose of deliberation to reach a decision in the matter of **Oyindamola Ogunlana**. Additionally, Ms. Zehr moved that, Dr. Mangrum, Ms. Hardy, Ms. Davis, Ms. Claiborne, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Dr. Cox and carried unanimously.
- RECONVENTION: The Board reconvened in open session at 2:12 P.M.
- Ms. Zehr moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Dr. Cox and carried unanimously.
- ACTION: Dr. Parke moved that the Board revoke the license of **Oyindamola Ogunlana** to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Davis and passed unanimously.
- This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.
- ADJOURNMENT: The Board adjourned at 2:13 P.M.

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Randall Mangrum, DNP, RN  
Deputy Executive Director for Advanced Practice

**VIRGINIA BOARD OF NURSING  
BUSINESS MEETING MINUTES  
May 19, 2026**

**B2**

**TIME AND PLACE:** The business meeting of the Board of Nursing was called to order at 9:00 A.M. on May 19, 2026, in Board Room 2, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

**PRESIDING:** Carol Cartte, RN, BSN; President

**BOARD MEMBERS PRESENT:** Victoria Cox, DNP, RN  
Pamela Davis, LPN  
Cleopatra Kitt, PhD, Citizen Member  
Yesenia Nunez, MSN, FNP-BC  
Helen Parke, DNP, FNP-BC  
Lila Peake, RN  
Jeanell Webb-Jones, MSN, RN, AMB-RN  
Jodi Zehr, RN

**MEMBERS ABSENT:** Delia Acuna, FNP-C  
Tauna Gulley, PhD, FNP-BC, CNE  
Paul Hogan, Citizen Member  
Dolores Valenta, LPN  
Kathleen Ware, DNP, MSN, RN

**STAFF PRESENT:** Claire Morris, RN, LNHA; Executive Director  
Randall Mangrum, DNP, RN; Deputy Executive Director for Advanced Practice  
Christina Bargdill, BSN, MHS, RN; Deputy Executive Director  
Ann Hardy, MSN, RN; Deputy Executive Director  
Stephanie Willinger, Deputy Executive Director  
Jacquelyn Wilmoth, MSN, RN; Deputy Executive Director for Education  
Patricia Dewey, RN, BSN; Discipline Case Manager  
Monique Davis, MPH, MB, BSN; Discipline Case Manager  
Ka Yu-Cheng, RD, RN, SMQT; Compliance & Case Adjudication Manager  
Huong Vu, Operations Manager

**OTHERS PRESENT:** Matt Novak, DHP Policy and Economic Analyst

**IN THE AUDIENCE:** Yvette Dorsey, DNP, MSN, RN, Director of the Virginia Nursing Workforce Center (VNWC)  
Terri Gaffney, PhD, MPA, RN, CNE, Virginia Nurses Association (VNA)

**ESTABLISHMENT OF A QUORUM:** With 9 members present, Ms. Cartte indicated that a quorum was established.

Ms. Cartte welcomed Ms. Nunez to the Board and asked Ms. Nunez to provide her background.

Ms. Nunez provided brief background information.

- PUBLIC COMMENT:** Yvette Dorsey, DNP, MSN, RN, Director of the Virginia Nursing Workforce Center (VNWC) reported the following:
- Dr. Dorsey thanked the Board for soliciting the VNWC Summit on May 12, 2026. It was successful with about 145-150 attendees. The Summit will be annual Summit during the nurse week, and the next Summit will be on May 12, 2027, which will include scholarship recognition, Statewide DAISY Award Presentation and keynote speakers.
  - Waiting on budget amendment regarding HB815 & SB405 (Virginia Health Workforce Development Authority; administration of nursing scholarships). If approved then it will be effective on July 1, 2026.
  - Clinical placements in the Commonwealth – the goal is to find a common clinical placement platform in Virginia.

Ms. Morris noted that she attended the Summit and applauded Dr. Dorsey for her effort to ensure all relevant stakeholders are at the table to address nursing healthcare workforce challenges.

Terri Gaffney, PhD, MPA, RN, CNE, Virginia Nurses Association (VNA) reported the following:

- Online Leadership Development application is available until the end of May.
- VNA is still looking for nominations for Under 40 Awards which will be presented at the annual meeting.
- June is the month of advocacy actions
- The virtual Annual Legislative Summit will be held on Thursday, September 24, 2026
- Fall Conference will be on November 21-24, 2026 in Short Pump

**ANNOUNCEMENTS:** Ms. Cartte announced the following:

**Board Member Update:**

- Board Members, **Delia Acuna, FNP-C and Lila Peake, RN**, have resigned their positions as Board Members effective June 1, 2026.

**Staff Update:**

- **Shaniqua Oliver** has accepted the Senior Licensing Specialist position and started on May 10, 2026.

**UPCOMING MEETINGS:** The upcoming meetings listed on the agenda:

- The Education Informal Conference Committee is scheduled for June 17, 2026, at 9 am in Board Room 4.
- The Committee of the Joint Boards of Nursing and Medicine

Meeting/Hearing is scheduled for June 17, 2026, at 9 am in Board Room 2.

- NCSBN Discipline Case Management Conference is scheduled for May 27-28, 2026, in Rosemont, IL. Patricia Dewey and Monique Davis will attend.
- NCSBN's 2026 Executive Officer Leadership Summit is scheduled for June 9-10, 2026, in Nashville, TN. Claire Morris will attend.
- NCSBN Annual Meeting is scheduled for August 19-21, 2026 in Chicago. Please let Ms. Morris and/or Ms. Vu know if you are interested in attending.

**REMINDER** of Additional Special Conference Committee (SCC) to hear reinstatement cases:

**April 2026:**

- SCC-A – Tuesday, June 9, 2026 → Cartte, Hogan and Peterson, LMT
- SCC-C – Thursday, June 11, 2026 → Cartte and Valenta
- SCC-B – Friday, June 12, 2026 → Cartte and Davis
- SCC-D – Monday, June 22, 2026 → Cox and Zehr

REMINDER of Formal Hearings:

- Tuesday, June 30, 2026, in Board Room 4 → **Cartte, Parke, Cox, Davis, Peake and Valenta**

• **Nursing and Nurse Aide Education Program Training Sessions:**

- Preparation and Regulation Review for Program Directors and Faculty of Pre-Licensure Nursing Programs Seminar is scheduled for June 3, 2026, 9 am to 12 pm, at Department of Health Professions Office, Conference Center 201, 9960 Mayland Drive, Henrico, VA 23233.
- Survey Visit Preparation and Review of Regulations for Approved Nurse Aide Education Programs Seminar is scheduled for June 3, 2026, 1 pm to 4 pm, at Department of Health Professions Office, Conference Center 201, 9960 Mayland Drive, Henrico, VA 23233.
- Review of the Application Process to Receive Approval to Establish a Nurse Aide Education Program Seminar is scheduled **VIRTUALLY** for September 16, 2026, 1 pm to 3 pm.

Ms. Cartte asked staff if there are modifications to the agenda.

Ms. Morris stated that there is no modification to the agenda.

**CONSENT AGENDA:**

The Board pulled the following items from the Consent Agenda for discussion:

**C9** – NCSBN Virtual APRN Roundtable Meeting on April 29, 2026

**C10** - NCSBN NCLEX Item Review Subcommittee (NIRSC) May 12-14, 2026 Meeting in Chicago, IL

Ms. Davis moved to accept the items on the consent agenda as presented. The motion was seconded by Dr. Parke and carried unanimously.

**Consent Agenda**

<b>B1</b> March 23, 2026	Formal Hearings
<b>B2</b> March 24, 2026	Business Meeting
<b>B3</b> March 25, 2026	Board of Nursing Officer Meeting
<b>B4</b> March 25, 2026	Panel A – Formal Hearings
<b>B5</b> March 25, 2026	Panel B - Formal Hearings
<b>B6</b> March 26, 2026	Formal Hearings
<b>B7</b> April 9, 2026	Telephone Conference Call
<b>B8</b> April 23, 2026	Telephone Conference Call
<b>B9</b> April 30, 2026	Formal Hearings

**C1** - Board of Nursing Monthly Tracking Log

**C2** - Agency Subordinate Recommendation Tracking Log

**C3** - Executive Director Report

**C4** – HPMP Quarterly Report – October 1 – December 31, 2025

**C5** - The Committee of the Joint Boards of Nursing and Medicine Telephone Conference Call minutes on April 1, 2026.

**C6** - The Committee of the Joint Boards of Nursing and Medicine Business Meeting on April 22, 2026.

**C7** - The Committee of the Joint Boards of Nursing and Medicine Formal Hearing minutes on April 22, 2026.

**C8** - Federation of State Massage Therapy Boards (FSMTB) 2026 Massage Board Executive (MBE) Summit on April 22-24, 2026, in Providence, RI.

**Consent Agenda Items pulled for discussion:**

**C9** – NCSBN Virtual APRN Roundtable Meeting on April 29, 2026

Ms. Morris stated that Alabama Board requires individuals enrolled in APRN programs to have bedside practice of 3000 hours as an RN. Ms. Morris noted that Virginia does not regulate APRN programs.

Ms. Morris pointed out that NCSBN is currently proposing placing Family APRN with experience in emergency room (ER) setting.  
Dr. Parker noted that the top three schools in the US offer education studies for ER.

Ms. Wilmoth added that at its Annual Meeting in August 2026, NCSBN will present Consensus Model for APRN Regulations adding APRNs in the ER setting for consideration.

**C10 - NCSBN NCLEX Item Review Subcommittee (NIRSC) May 12-14, 2026 Meeting in Chicago, IL**

Ms. Morris stated that NCSBN will present for consideration at its Annual Meeting the NCLEX exam fee increase of \$350.00, currently the fee is \$200.00 which has been for 25 years.

Ms. Wilmoth added that many nursing education programs include the cost of NCLEX exam in their tuitions or have scholarships or reimburse the cost of NCLEX exam if students pass the exam at the first try.

Dr. Parke moved to accept **C9, C10 and C11** (The Committee of the Joint Boards of Nursing and Medicine Telephone Conference Call minutes on May 7, 2026) as presented. The motion was seconded by Ms. Webb-Jones and carried unanimously.

DISPOSITION OF  
MINUTES:

None

REPORTS:

**DHP Performance Measure Report Q3 2022 – Q3 2026:**

Ms. Cartte noted that this is provide for information only.

OTHER MATTERS:

**Board Counsel Update:**

Ms. Blose reported that the Board received notification of two appeals pending at the Circuit Court and no final resolution determined yet.

**D1 - Informal Conference Schedule for Second Half of 2026**

Ms. Cartte encouraged board members to pick up extra scheduled Special Conference Committee (SCC) dates due to early departure of two board members.

Ms. Hardy added that she will email board members the needed dates of the SCC-A and SCC-D in August, October and December.

RECESS:

The Board recessed at 9:47 A.M.

RECONVENTION:

The Board reconvened at 10:00 A.M.

**POLICY FORUM - Healthcare Workforce Data Center (HWDC) Reports – Yetty Shobo, PhD, Executive Director and Barbara Hodgdon, PhD, Deputy Director**

➤ Virginia’s Nursing Education Programs: 2024-2025 Academic Year

Dr. Hodgdon reported the Key Findings as follows:

- Attrition rates in PN proprietary programs and RN associate programs are a concern
- Percentage of total capacity unfilled has decreased for PN programs; could be the start of a shift in the trend
- Facility commitment and faculty shortages continue to be barriers for both PN and RN programs
- RN programs saw a decrease in turnover rates and a decrease in in percentage newly appointed
- Higher resignations than appointments in Adult HOE extended PN programs

Dr. Kitt moved that the Board of Nursing approve the report as presented. The motion was seconded by Dr. Parke and carried unanimously.

EDUCATION:

**Education Update:**

Ms. Wilmoth reported the following:

**Nurse Aide Education Program Updates**

- Testing Update – the average wait time to test is less than 30 days. Candidates drive on average <30 miles to testing site. Credentia is proactive in rescheduling if there are issues. The backlog of testers is decreasing significantly. Board staff continue to meet with Credentia bi-monthly.

**Medication Aide Program Updates**

- Another Medication Aide project is underway – to ensure the Board has accurate information regarding the number of active medication aide programs and to further support those with poor pass rates.
  - ✓ Staff are currently contacting programs with no pass rates for the past 2 years to determine if they remain active programs.
  - ✓ Staff are also contacting programs with pass rates less than 80% for 2 consecutive years to ensure they are using the current curriculum and the instructor meets regulatory guidelines. Programs have access to their weak areas on the PSI dashboard – board staff are working to educate programs on using the data to support their curriculum and their students.

**Nursing Education Programs Updates**

- NCSBN Annual Report – has closed and we are awaiting results from NCSBN. Results should be available in September 2026.

LEGISLATION/  
REGULATION:

**F1 - Chart of Regulatory Actions**

Mr. Novak reviewed the Chart of Regulatory Actions provided on the agenda.

**F2 – Closure of Periodic Reviews and Issuance of NOIRA – Chapter 30 and 40**

Mr. Novak noted that this is a recommendation of the Committee of the Joint Boards of Nursing and Medicine which met on April 22, 2026.

Mr. Novak added that if the Board of Nursing approves this action, it will be presented to the Board of Medicine for approval.

Dr. Parke moved that the Board of Nursing to accept the recommendation by the Committee of the Joint Boards to close the periodic reviews of Chapter 30 and 40 and to issue a Notice of Intended Regulatory Action (NOIRA) as presented. The motion was seconded by Ms. Zehr and carried unanimously.

**F3 – Revision of Guidance Document 90-62: Medication Administration Training Curriculum Approved by the Board of Nursing for Various Settings**

Mr. Novak the changes to GD 90-62 encompass changes in the statute from the 2026 General Assembly session.

Ms. Zehr moved that the Board of Nursing to amend GD 90-62 as presented. The motion was seconded by Dr. Kitt and carried unanimously.

**CONSIDERATION OF CONSENT ORDER:**

**G1 – Kristina Marie Deguel, RN**

**0001-256138**

Ms. Davis moved that the Board of Nursing accept the consent order to continue the license of **Kristina Marie Degule** to practice professional nursing in the Commonwealth of Virginia on indefinitely suspended. The motion was seconded by Dr. Kitt and carried unanimously.

**G2 – Amy Marie Willoughby, RN**

**0001-212805**

Ms. Davis moved that the Board of Nursing modify the consent order to include Findings of Fact #4, #4(b) and #4(b)(i) in the Confidential Exhibit, to

grant the application of **Amy Marie Willoughby** for reinstatement of her license to practice professional nursing in the Commonwealth of Virginia, and to indefinitely suspend her license with suspension stayed contingent upon Ms. Willoughby's continued compliance with all terms and conditions of the Virginia Health Practitioners' Monitoring Program (HPMP) for the period specified by the HPMP. The motion was seconded by Dr. Parke and carried unanimously.

**G3 – Claudia Rose Guerra, RN**

**0001-241773**

Ms. Zehr moved that the Board of Nursing accept the consent order to grant the application of **Claudia Rose Guerra** for reinstatement of her license to practice professional nursing in the Commonwealth of Virginia contingent upon Ms. Guerra successful complete of a Board-approved nursing refresher course, suspend her license with suspension stayed contingent upon Ms. Guerra's continued compliance with all terms and conditions of the Virginia Health Practitioners' Monitoring Program (HPMP) with for the period specified by the HPMP. The motion was seconded by Ms. Davis and carried unanimously.

**G4 – Courtney Elizabeth Downs, RN Reinstatement Applicant**

**0001-246175**

Ms. Zehr moved that the Board of Nursing accept the consent order to grant the application of **Courtney Elizabeth Downs** for reinstatement of her license, Valid in Virginia only, to practice professional nursing in the Commonwealth of Virginia, to indefinitely suspend her license with suspension stayed contingent upon Ms. Downs 'entry into a contract with the Virginia Health Practitioners' Monitoring Program (HPMP) and comply with all terms and conditions of the HPMP for the period specified by the HPMP. The motion was seconded by Ma. Davis and carried unanimously.

**BOARD MEMBER DEVELOPMENT:**

Sanction Reference Point (SRP) System

- Guidance Document (GD) 90-7: Sanctioning Reference Points Instruction Manual

Board Member – Guide to SRT video was provided to Board Members for review.

Ms. Morris reviewed the SRP Instruction Manual for nurses including:

- SRP Inability to Safely Practice Worksheet
- SRP Patient Care Worksheet
- SRP Fraud Worksheet

Ms. Morris also presented scenario cases as practice to help Board Members have a better understanding of the SRP Worksheets.

RECESS: The Board recessed at 11:27 A.M.

RECONVENTION: The Board reconvened at 12:45 P.M.

**POSSIBLE SUMMARY SUSPENSION CONSIDERATION:**

David Kazzie, Deputy Executive Director, Tammie Jones, Elizabeth Dorsey and Piero Mannino, Adjudication Specialists/Consultant, Administrative Proceedings Division (APD), joined the meeting at 12:50 PM.

Tammie Jones presented evidence that the continued practice of professional nursing by **Stephanie Nganso Nyame, RN (0001-294347)** may present a substantial danger to the health and safety of the public.

Dr. Parke moved to summarily suspend the right to renew the license of **Stephanie Nganso Nyame** to practice professional nursing in the Commonwealth of Virginia pending a formal administrative hearing and to offer a consent order for revocation of her right to renew her license in lieu of a formal hearing. The motion was seconded Ms. Webb-Jones and carried unanimously.

Tammie Jones presented evidence that the continued practice of professional nursing by **Mariam Kanoute, RN (0001-306651)** may present a substantial danger to the health and safety of the public.

Ms. Nunez moved to summarily suspend the license of **Mariam Kanoute** to practice professional nursing in the Commonwealth of Virginia pending a formal administrative hearing and offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Piero Mannino presented evidence that the continued practice of practical nursing by **Nicole Johnson, LPN (0002-104534)** may present a substantial danger to the health and safety of the public.

Ms. Davis moved to summarily suspend the license of **Nicole Johnson** to practice practical nursing in the Commonwealth of Virginia pending a formal administrative hearing and offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Zehr and carried unanimously.

Piero Mannino presented evidence that the continued practice as a registered medication aide by **Nicole Johnson, RMA (0031-010926)** may present a substantial danger to the health and safety of the public.

Ms. David moved to summarily suspend the registration of **Nicole Johnson** to practice as a medication aide in the Commonwealth of Virginia pending a formal administrative hearing and offer a consent order for revocation of her registration in lieu of a formal hearing. The motion was seconded by Ms. Zehr and carried unanimously.

### **A Visit from Lauryn Walker, PhD, Deputy Secretary, Health and Human Resources**

Dr. Walker presented to the Board a thank you and a Happy Nurse Week from Secretary Figueroa for all their hard work.

Dr. Walker asked the Board for any healthcare issues that they would like Secretary Figueroa to consider. The Board stated APRN Compact, Long Term Care and retention of staff in Long Term Care facilities.

Dr. Walker thanked the Board for all that they do. The Board thanked Dr. Walker for her visit.

Dr. Walker left at 1:50 P.M.

### **POSSIBLE SUMMARY SUSPENSION CONSIDERATION (cont.):**

Elizabeth Dorsey presented evidence that the continued practice of massage therapy by **Chunhua Wang Dickey, LMT (0019-016657)** may present a substantial danger to the health and safety of the public.

Ms. Zehr moved to summarily suspend the right to renew the license of **Chunhua Wang Dickey** to practice massage therapy in the Commonwealth of Virginia pending a formal administrative hearing and offer a consent order for revocation of her right to renew her license in lieu of a formal hearing. The motion was seconded by Ms. Nunez and carried unanimously.

Elizabeth Dorsey presented evidence that the continued practice of professional nursing by **Amy Commer Mills, RN (0001-230722)** may present a substantial danger to the health and safety of the public.

Ms. Zehr moved to summarily suspend the license of **Amy Comer Mills** to practice professional nursing in the Commonwealth of Virginia pending a formal administrative hearing and to offer a consent order for revocation of

her license in lieu of a formal hearing. The motion was seconded Ms. Webb-Jones and carried unanimously. Dr. Parke rescued from voting.

David Kazzie, Deputy Executive Director, Tammie Jones, Elizabeth Dorsey and Piero Mannino, Adjudication Specialists/Consultant, Administrative Proceedings Division (APD), left the meeting at 2:04 pm.

**CONSIDERATION OF AGENCY SUBORDINATE RECOMMENDATIONS:**

**#19 – Rhonda N. Ivory, LPN**

**0002-078113**

Ms. Ivory appeared and addressed the Board.

**CLOSED MEETING:**

Dr. Kitt moved that the Board of Nursing convene a closed meeting pursuant to Section 2.2-3711(A)(27) of the *Code of Virginia* at 2:11 P.M. for the purpose of considering the agency subordinate recommendations regarding **Rhonda N. Ivory, LPN**. Additionally, Dr. Kitt moved that Ms. Morris, Dr. Mangrum, Ms. Bargdill, Ms. Hardy, Ms. Willinger, Ms. Wilmoth, Ms. Vu and Ms. Blöse, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary, and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Davis and carried unanimously.

**RECONVENTION:**

The Board reconvened in open session at 2:15 P.M.

Dr. Kitt moved that the Board of Nursing certify that it heard, discussed and considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Ms. Davis moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand Rhonda N. Ivory and to revoke her license to practice practical nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Zehr and carried unanimously.

**The following Agency Subordinate Recommendations were accepted by the Board as presented:**

**#2 – Tahmeesha Lynett Finley, RN**

**0001-261812**

Mr. Finley did not appear but submitted written response.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Tahmeesha Lynett Finley** and to

indefinitely suspend her license to practice professional nursing in the Commonwealth of Virginia with suspension stayed upon proof of Ms. Finley's entry into a contract with the Health Practitioners' Monitoring Program (HPMP) within 90 days from the date of entry of the Order and remain in compliance with all terms and conditions of the HPMP for the period specified by the HPMP. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#3 – Fenet Ayele Mulugeta, RN Applicant**

**Case # 249509**

Ms. Mulugeta did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to deny the application of **Fenet Ayele Mulugeta** for licensure to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#4 – Melanie Kay Holcomb Kello, LPN**

**0002-062591**

Ms. Kello did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Melanie Kay Holcomb Kello** and to indefinitely suspend her license to practice professional nursing in the Commonwealth of Virginia with suspension stayed upon proof of Ms. Kello's entry into a contract with the Health Practitioners' Monitoring Program (HPMP) and remain in compliance with all terms and conditions of the HPMP for the period specified by the HPMP. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#5 – Deborah Lynn Lester, RN**

**0001-158253**

Ms. Lester did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the right of **Deborah Lynn Lester** to renew her license practice professional nursing in the Commonwealth of Virginia until such time as she provides proof to the Board that she has satisfied the continuing competency requirements set forth in 18VAC90-19-160 of the Regulations. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#6 – Cyrstal Danyell Null, RN**

**0001-276308**

Ms. Null did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Cyrstal Danyell Null** and within 90 days from the date of entry of the Order, Ms. Null shall provide written proof satisfactory to the Board of successful completion of a Board-approved courses of at least three contact hours in the subjects of (i) proper documentation, (ii) professional accountability and legal liability for nurses, and (iii) ethics and professionalism in nursing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#7 – Christelle Tchakouano Ngwayap, LPN** **0002-101664**

Ms. Ngwayap did not appear but submitted a written response.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to require **Christelle Tchakouano Ngwayap** within 90 days from the date of entry of the Order, shall provide written proof satisfactory to the Board of successful completion of a Board-approved courses of at least three contact hours in the subjects of (i) ethics and professionalism in nursing, and (ii) professional accountability and legal liability for nurses. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#8 – Charlotte Anne Dere, LPN** **0002-079057**

Ms. Dere did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to require **Charlotte Anne Dere** within 90 days from the date of entry of the Order, shall provide written proof satisfactory to the Board of successful completion of a Board-approved courses of at least three contact hours in the subjects of (i) physical assessments, (ii) documentation, and (iii) professional accountability and legal liability for nurses. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#9 – Hannah Amankwah, RN Applicant** **Case # 246842**

Ms. Owen did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to deny the application of **Hannah Amankwah** for licensure to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#11 – Makesha Cartina Ndiaye, LPN** **0002-068703**

Ms. Ndiaye did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Makesha Cartina Ndiaye** and to revoke her license to practice practical nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#13 – Rebekah Young, CNA Applicant**

**Case # 250072**

Ms. Young did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to deny the application of **Rebekah Young** for certification by examination to practice as a certified nurse aide in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#14 – Latia A. Phipps, LPN**

**0002-085937**

Ms. Phepps did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of **Latia A. Phipps** to practice practical nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#15 – Harrison Mitchell, RN**

**North Carolina License # 245946  
With Multistate Privilege**

Mr. Mitchell did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Harrison Mitchell** and within 90 days from the date of entry of the Order, Mr. Mitchell shall provide written proof satisfactory to the Board of successful completion of a Board-approved courses of at least three contact hours in the subject of professional accountability and legal liability for nurses. The motion was seconded by Ms. Webb-Jones carried unanimously.

**#16 – Megan E. Bailey, LPN**

**0002-096805**

Ms. Bailey did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Megan E. Bailey** and within 60 days from the date of entry of the Order, Ms. Bailey shall provide written proof satisfactory to the Board of successful completion of a Board-approved

courses of at least three contact hours in the subjects of (i) professional accountability and legal liability for nurses, and (ii) ethics and boundaries. Ms. Bailey's license to practice practical nursing in the Commonwealth of Virginia will be marked "Valid in Virginia Only." The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#17 – Brianna Paige Houchins, LPN**

**0002-103356**

Mr. Houchins did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to require **Brianna Paige Houchins** within 90 days from the date of entry of the Order, shall provide written proof satisfactory to the Board of successful completion of a Board-approved courses of at least three contact hours in the subjects of (i) documentation, (ii) critical thinking, and (iii) professional accountability and legal liability as it relates to the practice of practical nursing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#18 – Brandee Elizabeth-Casillas Manuel, RN**

**0001-317493**

Ms. Manuel did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to indefinitely suspend the license of **Brandee Elizabeth-Casillas Manuel** to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#21 – Hawanatu S. Kalokoh, RMA Applicant**

**Case # 249500**

Ms. Kalokoh did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to deny the application of **Hawanatu S. Kalokoh** for registration to practice as a medication aide in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#23 – Samantha S. Adkins, CNA**

**1401-222718**

Ms. Adkins did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to revoke the certificate of **Samantha S. Adkins** to practice as a nurse aide in the Commonwealth of Virginia and to enter a

Finding of Abuse against her in the Virginia Nurse Aide Registry. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#25 – Quintarah Amiyo Hammond, RN**

**0001-275277**

Ms. Hammond did not appear.

Dr. Parke moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Quintarah Amiyo Hammond** and indefinitely suspend her license to practice professional nursing in the Commonwealth of Virginia with suspension stayed upon proof of Ms. Hammond's entry into a contract with the Virginia Health Practitioners' Monitoring Program (HPMP) and remain in compliance with all terms and conditions of the HPMP for the period specified by the HPMP. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**The Board went into closed session to consider the remaining agency subordinate recommendation:**

**CLOSED MEETING:**

Dr. Kitt moved that the Board of Nursing convene a closed meeting pursuant to Section 2.2-3711(A)(27) of the *Code of Virginia* at 2:20 P.M. for the purpose of considering the remaining agency subordinate recommendations regarding **#1, #10, #12, #20, #22, #24 and #26**. Additionally, Dr. Kitt moved that Ms. Morris, Dr. Mangrum, Ms. Bargdill, Ms. Hardy, Ms. Willinger, Ms. Wilmoth, Ms. Vu and Ms. Blose, Board Counsel attend the closed meeting because their presence in the closed meeting is deemed necessary, and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**RECONVENTION:**

The Board reconvened in open session at 2:58 P.M.

Dr. Kitt moved that the Board of Nursing certify that it heard, discussed and considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#1 – Zennash Dagnachew-Bisrat, LPN**

**0002-087206**

Ms. Dagnachew-Bisrat did not appear but submitted a written response.

Dr. Parke moved that the Board of Nursing reject the recommended decision of the agency subordinate and to refer the matter of **Zennash Dagnachew-Bisrat** to a formal administrative proceeding. The motion was seconded by Ms. Nunez and carried unanimously.

**#10 – Jennifer Brown Lovelace, LPN**

**NC License # 066860  
With Multistate Privilege**

Ms. Lovelace did not appear.

Ms. Zehr moved that the Board of Nursing reject the recommended decision of the agency subordinate regarding **Jennifer Brown Lovelace**. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#12 – Ashley Lynn Thompson, LPN**

**0002-099824**

Ms. Thompson did not appear.

Ms. Davis moved that the Board of Nursing accept the recommended decision of the agency subordinate to reprimand **Ashley Lynn Thompson** and her license to practice practical nursing will be single state and valid in Virginia only. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#20 – Darlene Gandy Wilson, CNA**

**1401-115808**

Ms. Wilson did not appear but submitted a written response.

Ms. Cartte moved that the Board of Nursing accept the recommended decision of the agency subordinate to require **Darlene Gandy Wilson**, within 90 days from the entry of the Order, to provide written proof satisfactory to the Board of successful completion of a Board-approved course of at least three contact hours in the subjects of: (i) professional accountability and legal liability for nurse aides, and (ii) providing proper nurse aide care for patients with dementia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**#22 – Sheri Saul, CNA**

**1401-248120**

Ms. Saul did not appear.

Ms. Davis moved that the Board of Nursing modify the recommended decision of the agency subordinate to revoke the certificate of **Sheri Saul** to practice as a nurse aide in the Commonwealth of Virginia and to enter a Finding of Abuse against her in the Virginia Nurse Aide Registry. The motion was seconded by Dr. Cox and carried unanimously.

**#24 – Yovinta Breventos, CNA**

**1401-227954**

Mr. Breventos did not appear.

Dr. Kitt moved that the Board of Nursing accept the recommended decision of the agency subordinate to revoke the right of **Yovinta Breventos** to renew

his certificate to practice as a nurse aide in the Commonwealth of Virginia and enter a Finding of Abuse against him in the Virginia Nurse Aide Registry. The motion was seconded by Ms. Peake and carried unanimously.

**#26 – Charmaine Leigh Belcher, RN**

**0001-315956**

Ms. Belcher did not appear.

Dr. Parke moved that the Board of Nursing to reject the recommended decision of the agency subordinate and to refer the matter of **Charmaine Leigh Belcher** to a formal administrative proceeding. The motion was seconded by Dr. Cox and carried unanimously.

**E1 – Education Special Conference Committee April 15, 2026 minutes**

Dr. Parke moved to accept the Education Special Conference Committee April 15, 2026 minutes as presented. The motion was seconded by Dr. Kitt and carried unanimously.

Ms. Cartte and Ms. Davis did not participate in voting.

**CONSIDERATION OF THE APRIL 15, 2026 EDUCATION SPECIAL CONFERENCE COMMITTEE RECOMMENDATION:**

**E1a – Astar Education Institute Nurse Aide Education Program, 1414100751, case # 255791**

Dr. Parke moved that the Board of Nursing accept the recommendation of the Education Special Conference to withdraw the approval of **Astar Education Institute Nurse Aide Education Program** to operate a medication aide education program effective the date of the entry of the Order. The motion was seconded by Dr. Kitt and carried unanimously.

Ms. Cartte and Ms. Davis did not participate in voting.

**E1b – Ultimate Health School Practical Nursing Education Program, US28420500, case # 245107 and 255775**

Dr. Parke moved that the Board of Nursing accept the recommendation of the Education Special Conference to continue the approval of **Ultimate Health School Practical Nursing Education Program** to operate a practical education program on conditional approval subject to terms and conditions. The motion was seconded by Dr. Kitt and carried unanimously.

Ms. Cartte and Ms. Davis did not participate in voting.

**E1c – America School of Nursing and Allied Health Practical Nursing Education Program, US28408900, case # 255188**

Dr. Parke moved that the Board of Nursing accept the recommendation of the Education Special Conference to continue the approval of **America School of Nursing and Allied Health Practical Nursing Education Program** to operate a practical education program on conditional approval subject to terms and conditions. The motion was seconded by Dr. Kitt and carried unanimously.

Ms. Cartte and Ms. Davis did not participate in voting.

**BOARD MEMBER DEVELOPMENT (cont.):**

CNA Federal Registry and Discipline

- Overview of Nurse Aide Regulations

Ms. Morris reviewed the Nurse Aide Regulations

**MEETING DEBRIEF:**

What went well:

- Great Board Member Development
- Enjoy the visit from Dr. Walker
- Appreciate the expiration dates on the Statements of Allegations
- Cover sheet regarding Regulatory actions is helpful

What needs improvement:

- None was noted

**ADJOURNMENT:**

The Board adjourned at 4:03 P.M.

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Carol Cartte, RN, BSN  
President

**Virginia Board of Nursing  
OFFICER MEETING**

**B3**

**May 20, 2026**

**Time and Place:** The Board of Nursing Officer meeting was convened at 8:00 A.M. on May 20, 2026 at Department of Health Professions – Perimeter Center, 9960 Mayland Drive, Suite 201 – Hearing Room 4, Henrico, Virginia.

**Board Members Present:** Carol Cartte, RN, BSN; President  
Helen Parke, DNP, FNP-BC; First Vice President  
Victoria Cox, DNP, RN; Second Vice President

**Staff Members Present:** Claire Morris, RN, LNHA

- **May 19, 2026 Business Meeting Debrief**
- Officers appreciated the Board Development session.
- **New Board Member Mentorship**
- Discussed materials to be used to assist with new board member mentorship. The Board President will assign mentors.
- **Future Training Topics for Board Members**
- Special Conference Committee (SCC) Chair training.
- Board Counsel presentation regarding the summary suspension and formal hearing process.

The meeting was adjourned at 8:48am.

**VIRGINIA BOARD OF NURSING  
FORMAL HEARINGS  
PANEL A  
May 20, 2026**

**B4**

TIME AND PLACE: The meeting of the Virginia Board of Nursing was called to order at 9:04 A.M., on May 20, 2026, in Board Room 2, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

**BOARD MEMBERS  
PRESENT:**

Carol Cartte, RN, BSN; **President**  
Victoria Cox, DNP, RN  
Pamela Davis, LPN  
Yesenia Nunez, MSN, FNP-BC  
Dolores Valenta, LPN  
Jeanell Webb-Jones, MSN, RN

**STAFF PRESENT:**

Claire Morris, RN, LNHA; Executive Director  
Christina Bargdill, BSN, MHS, RN; Deputy Executive Director  
Tamika Claiborne, BS; Senior Discipline Specialist

**OTHERS PRESENT:**

Sara Blose, Senior Assistant Attorney General  
Nurse Aide Students from Goochland High School

**ESTABLISHMENT  
OF A PANEL:**

With six members of the Board present, a panel was established.

**FORMAL HEARINGS:**

**Cassie L. Montgomery, RMA**

**0031-012795**

Ms. Montgomery did not appear.

Aaron Timberlake, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blose was legal counsel for the Board. Jasha Sykes, court reporter with County Court Reporters, recorded the proceedings.

Bryan Horowitz, Senior Investigator, Enforcement Division was present and testified.

**CLOSED MEETING:**

Ms. Valenta moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 9:26 A.M., for the purpose of deliberation to reach a decision in the matter of **Cassie L. Montgomery**. Additionally, Ms. Valenta moved that Ms. Morris, Ms. Bargdill, Ms. Claiborne, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**RECONVENTION:**

The Board reconvened in open session at 9:34 A.M.

Ms. Valenta moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**ACTION:** Ms. Davis moved that the Board revoke the registration of **Cassie L. Montgomery** to practice as a medication aide in the Commonwealth of Virginia. The motion was seconded by Ms. Nunez and carried unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

**RECESSED:** The Board recessed at 9:35 A.M.

**RECONVENTION:** The Board reconvened at 10:00 A.M.

**CONSIDERATION OF CONSENT ORDER:**

**Mollie Ann Griddine, LPN** **0002-100048**

Ms. Davis moved that the Board of Nursing accept the consent order to voluntarily surrender for indefinite suspension of **Mollie Griddine's** right to renew her license to practice practical nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and carried unanimously.

**RECESSED:** The Board recessed at 10:04 A.M.

**RECONVENTION:** The Board reconvened at 11:00 A.M.

**FORMAL HEARINGS:** **Michelle Irene Breeden, RMA** **0031-008538**

Ms. Breeden did not appear.

Piero Mannino, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blose was legal counsel for the Board. Jasha Sykes, court reporter with County Court Reporters, recorded the proceedings.

Emily Anderson, Senior Investigator, Enforcement Division, was present and testified. Krista Bradberry testified via telephone.

CLOSED MEETING: Ms. Valenta moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 11:15 A.M., for the purpose of deliberation to reach a decision in the matter of **Michelle Irene Breeden**. Additionally, Ms. Valenta moved that, Ms. Morris, Ms. Bargdill, Ms. Claiborne, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Webb-Jones and carried unanimously.

RECONVENTION: The Board reconvened in open session at 11:20 A.M.

Ms. Valenta moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Webb-Jones and carried unanimously.

ACTION: Ms. Davis moved that the Board revoke the registration of **Michelle Irene Breeden** to practice as a registered medication aide in the Commonwealth of Virginia. The motion was seconded by Ms. Webb-Jones and passed unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

RECESSED: The Board recessed at 11:21 A.M.

RECONVENTION: The Board reconvened at 2:00 P.M.

FORMAL HEARINGS: **Samuel Kanu, RN** **0001-304995**

Mr. Kanu did not appear.

Elizabeth Dorsey, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blose was legal counsel for the Board. Jasha Sykes, court reporter with County Court Reporters, recorded the proceedings.

Pamela Twombly, Deputy Director, Enforcement Division, was present and testified.

CLOSED MEETING: Ms. Valenta moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 2:22 P.M., for the purpose of deliberation to reach a decision in the matter of **Samuel Kanu**. Additionally, Ms. Valenta moved that Ms. Morris, Ms. Bargdill, Ms.

Claiborne, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Webb-Jones and carried unanimously.

RECONVENTION: The Board reconvened in open session at 2:32 P.M.

Ms. Valenta moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Webb-Jones and carried unanimously.

ACTION: Ms. Davis moved that the Board revoke the license of **Samuel Kanu** to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Nunez and passed unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

ADJOURNMENT: The Board adjourned at 2:33 P.M.

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Christina Bargdill, BSN, MHS, RN  
Deputy Executive Director

**VIRGINIA BOARD OF NURSING  
FORMAL HEARINGS  
PANEL B  
May 20, 2026**

**TIME AND PLACE:** The meeting of the Virginia Board of Nursing was called to order at 9:06 A.M., on May 20, 2026, in Board Room 4, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

**BOARD MEMBERS**

**PRESENT:**

Helen Parke, DNP, FNP-BC; **First Vice-President**  
Delia Acuna, FNP-C  
Cleopatra Kitt, PhD, Citizen Member  
Lila Peake, RN  
Jodi Zehr, RN

**STAFF PRESENT:**

Randall Mangrum, DNP, RN; Deputy Executive Director for Advanced Practice  
Ann Hardy, MSN, RN; Deputy Executive Director  
Cheryl Giles, Administrative Support Specialist

**OTHERS PRESENT:**

M. Brent Saunders, Senior Assistant Attorney General

**ESTABLISHMENT OF A PANEL:**

With five members of the Board present, a panel was established.

**FORMAL HEARINGS:**

**Brianna Harris, CNA**

**1401-210356**

Ms. Harris appeared.

Tammie Jones, Adjudication Consultant, Administrative Proceedings Division, represented the Commonwealth. Mr. Saunders was legal counsel for the Board. Canandez Long, court reporter with County Court Reporters, recorded the proceedings.

Paul Wade, Senior Investigator, Enforcement Division and Alicia Clatterbaugh, RMA were present and testified. Rachel Custer testified via telephone.

**CLOSED MEETING:**

Dr. Kitt moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 10:03 A.M., for the purpose of deliberation to reach a decision in the matter of **Brianna Harris**. Additionally, Dr. Kitt moved that Dr. Mangrum, Ms. Hardy, Ms. Giles, and Mr. Saunders, Board Counsel, attend the closed meeting

because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Acuna and carried unanimously.

RECONVENTION: The Board reconvened in open session at 10:20 A.M.

Dr. Kitt moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Zehr and carried unanimously.

ACTION: Ms. Acuna moved that the Board dismiss the case of **Brianna Harris** to practice as a nursing aide in the Commonwealth of Virginia. The motion was seconded by Ms. Peake and carried unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

RECESSED: The Board recessed at 10:21 A.M.

RECONVENED: The Board reconvened at 11:02 A.M.

FORMAL HEARINGS: **Judith Ngieh, RN** **0001-293879**

Ms. Ngieh did not appear.

Tammie Jones, Adjudication Consultant, Administrative Proceedings Division, represented the Commonwealth. Mr. Saunders was legal counsel for the Board. Canandez Long, court reporter with County Court Reporters, recorded the proceedings.

Cortney Merkel, Senior Investigator, Enforcement Division, was present and testified.

ACTION: Ms. Acuna moved that the Board revoke the right of **Judith Ngieh** to renew her license to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Dr. Kitt and passed unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

RECESSED: The Board recessed at 11:12 A.M.

RECONVENED: The Board reconvened at 1:18 P.M.

FORMAL HEARINGS: **Kelly Colleen Richardson,**  
**RN Reinstatement Applicant** **0001-179157**

Ms. Richardson appeared.

Amy Weiss, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Mr. Saunders was legal counsel for the Board. Canandez Long, court reporter with County Court Reporters, recorded the proceedings.

Tosha Fischetti, Senior Investigator, Enforcement Division was present and testified.

CLOSED MEETING: Dr. Kitt moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(16) of the Code of Virginia at 2:18 P.M., for the purpose of deliberation of the medical records of **Kerry Colleen Richardson**. Additionally, Dr. Kitt moved that Dr. Mangrum, Ms. Hardy, Ms. Giles, Ms. Weiss, Ms. Fischetti, Mr. Canandez Long, court reporter, and Mr. Saunders, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Acuna and carried unanimously.

RECONVENTION: The Board reconvened in open session at 2:29 P.M.

Dr. Kitt moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Acuna and carried unanimously.

RECESSED: The Board recessed at 2:30 P.M.

RECONVENED: The Board reconvened at 2:35 P.M.

CLOSED MEETING: Dr. Kitt moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 2:38 P.M., for the purpose of deliberation to reach a decision in the matter of **Kelly Colleen Richardson**. Additionally, Ms. Zehr moved that Dr. Mangrum, Ms. Hardy, Ms. Giles, and Mr. Saunders, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Acuna and carried unanimously.

RECONVENTION: The Board reconvened in open session at 3:02 P.M.

Dr. Kitt moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Acuna and carried unanimously.

ACTION: Ms. Acuna moved that the Board deny the application for reinstatement of **Kelly Colleen Richardson** and revoke her license to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Zehr and carried unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

FORMAL HEARINGS: **Mirble Foretia, RN** **0001-302325**

Ms. Foretia appeared.

Jovonni Armstead, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Mr. Saunders was legal counsel for the Board. Canandez Long, court reporter with County Court Reporters, recorded the proceedings.

Cortney Merkel, Senior Investigator, Enforcement Division, was present and testified.

CLOSED MEETING: Dr. Kitt moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 4:07 P.M., for the purpose of deliberation to reach a decision in the matter of **Mirble Foretia**. Additionally, Dr. Kitt moved that Dr. Mangrum, Ms. Hardy, Ms. Giles, and Mr. Saunders, Board Counsel, attend the closed meeting

because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Acuna and carried unanimously.

RECONVENTION: The Board reconvened in open session at 4:17 P.M.

Dr. Kitt moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Acuna and carried unanimously.

ACTION: Ms. Acuna moved that the Board revoke and invalidate the license number of **Mirble Foretia** to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Peake and passed unanimously.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

ADJOURNMENT: The Board adjourned at 4:18 P.M.

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Randall Mangrum, DNP, RN  
Deputy Executive Director for Advanced Practice

**VIRGINIA BOARD OF NURSING  
FORMAL HEARINGS  
May 21, 2026**

**TIME AND PLACE:** The meeting of the Virginia Board of Nursing was called to order at 9:00 A.M., on May 21, 2026, in Board Room 4, Department of Health Professions, 9960 Mayland Drive, Suite 201, Henrico, Virginia.

**BOARD MEMBERS  
PRESENT:**

Helen Parke, DNP, FNP-BC; **First Vice-President**  
Delia Acuna, FNP-C  
Pamela Davis, LPN  
Cleopatra Kitt, PhD, Citizen Member  
Dolores Valenta, LPN  
Jeanell Webb-Jones, MSN, RN  
Ann Lively, LMT – **9:00 a.m. and 2:00 p.m. cases only**

**STAFF PRESENT:**

Claire Morris, RN, LNHA; Executive Director  
Jacquelyn Wilmoth, RN, MSN; Deputy Executive Director for Education  
Christina Bargdill, BSN, MHS, RN; Deputy Executive Director  
Tamika Claiborne, BS; Senior Discipline Specialist

**OTHERS PRESENT:**

Sara Blöse, Senior Assistant Attorney General  
PN Students from Northern Virginia Community College

**ESTABLISHMENT  
OF A PANEL:**

With seven members of the Board present, a panel was established.

**FORMAL HEARINGS:**

**Anthony Otis Hayes, LMT** **0019-011948**

Mr. Hayes did not appear.

Amy Weiss, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blöse was legal counsel for the Board. Juan Ortega, court reporter with Ortega International Reporting, recorded the proceedings.

Parke Slater, Senior Investigator, Enforcement Division, Detective Chris Roop, Christiansburg Police Department, Sara Miller, Client A, Deborah Mitchell, Client C, Kimberly Lawson, Client D, and Ryan Peterson, Client G were present and testified.

**CLOSED MEETING:** Ms. Davis moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 11:00 A.M., for the purpose of deliberation to reach a decision in the matter of **Anthony Otis Hayes**. Additionally, Ms. Davis moved that Ms. Morris, Ms. Wilmoth, Ms. Claiborne, and Ms. Blöse, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Acuna and carried unanimously.

**RECONVENTION:** The Board reconvened in open session at 11:17 A.M.

Ms. Davis moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Acuna and carried unanimously.

**ACTION:** Ms. Lively moved that the Board of Nursing revoke the license of **Anthony Otis Hayes** to practice massage therapy in the Commonwealth of Virginia. The motion was seconded by Ms. Acuna and passed unanimously in favor of the motion.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

**RECESS:** The Board recessed at 11:18 A.M.

**RECONVENTION:** The Board reconvened at 1:00 P.M.

**FORMAL HEARINGS:** **Esther Wunze Wuabe, RN** **0001-317084**

Ms. Wuabe did not appear.

Jovonni Armstead, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blöse was legal counsel for the Board. Juan Ortega, court reporter with Ortega International Reporting, recorded the proceedings.

Kimberly Hyler, Senior Investigator, Enforcement Division, was present and testified.

CLOSED MEETING: Ms. Davis moved that the Board of Nursing convene a closed meeting pursuant to §2.2-3711(A)(27) of the Code of Virginia at 1:16 P.M., for the purpose of deliberation to reach a decision in the matter of **Esther Wunze Wuabe**. Additionally, Ms. Davis moved that Ms. Morris, Ms. Bargdill, Ms. Claiborne, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary and their presence will aid the Board in its deliberations. The motion was seconded by Ms. Acuna and carried unanimously.

RECONVENTION: The Board reconvened in open session at 1:25 P.M.

Ms. Davis moved that the Board of Nursing certify that it heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Ms. Acuna and carried unanimously.

ACTION: Ms. Acuna moved that the Board of Nursing revoke the license of **Esther Wunze Wuabe** to practice professional nursing in the Commonwealth of Virginia. The motion was seconded by Ms. Davis and carried unanimously in favor of the motion.

This decision shall be effective upon entry of a written Order by the Board stating the findings, conclusion, and decision of this formal hearing panel.

RECESS: The Board recessed at 1:26 P.M.

RECONVENTION: The Board reconvened at 2:07 P.M.

FORMAL HEARINGS: **Cuixiang Zhao, LMT** **0019-019759**

Ms. Zhao appeared, accompanied by her friend William Perry.

Aaron Timberlake, Adjudication Specialist, Administrative Proceedings Division, represented the Commonwealth. Ms. Blose was legal counsel for the Board. Juan Ortega, court reporter with Ortega International Reporting, recorded the proceedings.

The Chair granted a continuance of the case due to the need for interpreter services.

Virginia Board of Nursing  
Thursday Formal Hearings  
May 21, 2026

ADJOURNMENT:           The Board adjourned at 2:11 P.M.

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Christina Morris, BSN, MHS, RN  
Deputy Executive Director

**VIRGINIA BOARD OF NURSING  
POSSIBLE SUMMARY SUSPENSION TELEPHONE CONFERENCE CALL  
May 28, 2026**

A possible summary suspension telephone conference call of the Virginia Board of Nursing was held May 28, 2026, at 4:30 P.M.

**The Board of Nursing members participating in the call were:**

Carol Cartte, RN, BSN; **Chair**  
Victoria Cox, DNP, RN  
Pamela Davis, LPN  
Paul Hogan, Citizen Member  
Yesenia Nunez, MSN, FNP-BC  
Helen Parke, DNP, FNP-BC  
Dolores Valenta, LPN  
Jeanell Webb-Jones, MSN, RN  
Jodi Zehr, RN

**Others participating in the meeting were:**

Sara Blose, Assistant Attorney General, Board Counsel  
Jovonni Armstead, Adjudication Specialist, APD  
Elizabeth Dorsey, Adjudication Specialist, APD  
Piero Mannino, Adjudication Specialist, APD  
Amy Weiss, Adjudication Specialist, APD  
Claire Morris, RN, LNHA, Executive Director  
Christina Bargdill, BSN, MHS, RN, Deputy Executive Director  
Ann Hardy, MSN, RN; Deputy Executive Director  
Randall Mangrum, DNP, RN; Deputy Executive Director for Advance Practice  
Cheryl Giles, Administrative Support Specialist

The meeting was called to order by Ms. Cartte. With nine (9) members of the Board of Nursing participating, a quorum was established.

Piero Mannino, Adjudication Specialist, presented evidence that the continued practice of professional nursing by **Chiedozie Bob Eboh, RN (0001-298401)** may present a substantial danger to the health and safety of the public.

Ms. Zehr moved to summarily suspend the license of **Chiedozie Bob Eboh** to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Dr. Parke and carried unanimously.

Mr. Mannino left the meeting at 4:37 p.m.

Jovonni Armstead, Adjudication Specialist, presented evidence that the continued practice of professional nursing by **Mabinty Jalloh, RN (0001-306258)** may present a substantial danger to the health and safety of the public.

Dr. Parke moved to summarily suspend the license of **Mabinty Jalloh** to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Davis and carried unanimously.

Jovonni Armstead, Adjudication Specialist, presented evidence that the continued practice of professional nursing by **Joyalene Toure, RN (0001-300954)** may present a substantial danger to the health and safety of the public.

Ms. Davis moved to summarily suspend the license of **Joyalene Toure** to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Ms. Armstead left the meeting at 4:47 p.m.

Elizabeth Dorsey, Adjudication Specialist, presented evidence that the continued practice of nurse aide by **Veronica A. Kumah, CNA (1401-116727)** may present a substantial danger to the health and safety of the public.

Ms. Zehr moved to summarily suspend the certification of **Veronica A. Kumah** to practice as a nurse aide in the Commonwealth of Virginia and to offer a consent order for revocation with a Finding of Abuse of her certification in lieu of a formal hearing. The motion was seconded by Dr. Parke and carried unanimously.

Ms. Dorsey left the meeting at 4:53 p.m.

Amy Weiss, Adjudication Specialist, presented evidence that the continued practice of professional nursing by **Lauren Ann Robin, RN (0001-254591)** may present a substantial danger to the health and safety of the public.

Ms. Davis moved to summarily suspend the license of **Lauren Ann Robin** to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

The meeting was adjourned at 5:00 P.M.

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Claire Morris, RN, LNHA  
Executive Director

**VIRGINIA BOARD OF NURSING  
POSSIBLE SUMMARY SUSPENSION TELEPHONE CONFERENCE CALL  
June 11, 2026**

A possible summary suspension telephone conference call of the Virginia Board of Nursing was held June 11, 2026, at 4:30 P.M.

**The Board of Nursing members participating in the call were:**

Carol Cartte, RN, BSN; **Chair**  
Victoria Cox, DNP, RN  
Pamela Davis, LPN  
Paul Hogan, Citizen Member  
Cleopatra Kitt, PhD, Citizen Member  
Yesenia Nunez, MSN, FNP-BC – **joined at 4:35 P.M.**  
Helen Parke, DNP, FNP-BC  
Dolores Valenta, LPN  
Jeanell Webb-Jones, MSN, RN  
Jodi Zehr, RN

**Others participating in the meeting were:**

Sara Blöse, Assistant Attorney General, Board Counsel  
Aaron Timberlake, Adjudication Specialist, APD  
Avi Efreom, Adjudication Specialist, APD  
Piero Mannino, Adjudication Specialist, APD  
David Kazzie, Deputy Director, APD  
Christina Bargdill, BSN, MHS, RN, Deputy Executive Director  
Randall Mangrum, DNP, RN; Deputy Executive Director for Advance Practice  
Huong Vu, Operations Manager

The meeting was called to order by Ms. Cartte. With nine (9) members of the Board of Nursing participating, a quorum was established.

The Statement of Allegations were provided to Board Members in advance and Board Members had no additional questions for Piero Mannino, Adjudication Specialist, regarding the continued practice of professional nursing by **Pauline Ngoyit Etame, RN (0001-321339)** which may present a substantial danger to the health and safety of the public.

Ms. Davis moved to summarily suspend the right of **Pauline Ngoyit Etame** to renew her license to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Mr. Mannino left the meeting at 4:34 p.m.

The Statement of Allegations was provided to Board Members in advance and Board Members had no additional questions for Aaron Timberlake, Adjudication Specialist, regarding the continued practice of professional nursing by **Justina Manka Dorr, RN (0001-312214)** which may present a substantial danger to the health and safety of the public.

Ms. Zehr moved to summarily suspend the license of **Justina Manka Dorr** to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Ms. Nunez joined the meeting at 4:35 P.M.

Mr. Timberlake left the meeting at 4:36 PM

Avi Efreom, Adjudication Specialist, presented evidence that the continued practice of professional nursing by **Natascha Harris, RN (0001-290826)** may present a substantial danger to the health and safety of the public.

Dr. Parke moved to summarily suspend the license of **Natascha Harris** to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Davis and carried unanimously.

The meeting was adjourned at 4:46 P.M.

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Christina Bargdill, BSN, MHS, RN  
Deputy Executive Director

**VIRGINIA BOARD OF NURSING**  
**POSSIBLE SUMMARY SUSPENSION TELEPHONE CONFERENCE CALL**  
**June 25, 2026**

A possible summary suspension telephone conference call of the Virginia Board of Nursing was held June 25, 2026, at 4:30 P.M.

**The Board of Nursing members participating in the call were:**

Helen Parke, DNP, FNP-BC; **Chair**  
Victoria Cox, DNP, RN  
Pamela Davis, LPN  
Paul Hogan, Citizen Member  
Yesenia Nunez, MSN, FNP-BC  
Kathleen Ware, DNP, MSN, RN  
Jeanell Webb-Jones, MSN, RN  
Jodi Zehr, RN

**Others participating in the meeting were:**

Sara Blose, Assistant Attorney General, Board Counsel  
Jovonni Armstead, Adjudication Specialist, APD  
Avi Efreom, Adjudication Specialist, APD  
Piero Mannino, Adjudication Specialist, APD  
David Kazzie, Deputy Director, APD  
Claire Morris, RN, LNHA, Executive Director  
Randall Mangrum, DNP, RN; Deputy Executive Director for Advance Practice  
Monique Davis, BSN, MPH; Discipline Case Manager  
Huong Vu, Operations Manager

The meeting was called to order by Dr. Parke. With eight (8) members of the Board of Nursing participating, a quorum was established.

The Statement of Allegations was provided to Board Members in advance and Board Members had no additional questions for Jovonni Armstead, Adjudication Specialist, regarding the continued practice of professional nursing by **Agnes O. Aboagye, RN (0001-306391)** which may present a substantial danger to the health and safety of the public.

Ms. Zehr moved to summarily suspend the right of **Agnes O. Aboagye** to renew her license to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Davis and carried unanimously.

Ms. Armstead left the meeting at 4:35 p.m.

Pierro Mannino, Adjudication Specialist, presented evidence that the continued practice of practical nursing by **Carrie Ann Williams Densmore, LPN (0002-086562)** may present a substantial danger to the health and safety of the public.

Ms. Davis moved to summarily suspend the license of **Carrie Ann Williams Densmore** to practice practical nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her license in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Mr. Mannino left the meeting at 4:40 p.m.

Avi Efreom, Adjudication Specialist, presented evidence that the continued practice of practical nursing by **Kamiah Sashe Shepard, LPN (0002-087047)** and the practice of professional nursing by **Kamiah Sashe Shepard, RN (0001-330433)** may present a substantial danger to the health and safety of the public.

Ms. Zehr moved to summarily suspend the right of **Kamiah Sashe Shepard** to renew her license to practice practical nursing in the Commonwealth of Virginia and to offer a consent order for revocation of her right to renew her license in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Ms. Zehr moved to summarily suspend the license of **Kamiah Sashe Shepard** to practice professional nursing in the Commonwealth of Virginia and to offer a consent order for indefinite suspension of her license with suspension stayed contingent upon Ms. Shepard's entry into a contract with the Virginia Health Practitioners' Monitoring Program (HPMP) and comply with all terms and conditions of the HPMP for the period specified by the HPMP in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

Avi Efreom, Adjudication Specialist, presented evidence that the continued practice of practical nursing by **Melissa Marie Brown, LPN (0002-098586)** may present a substantial danger to the health and safety of the public.

Ms. Davis moved to summarily suspend the license of **Melissa Marie Brown** to practice practical nursing in the Commonwealth of Virginia and to offer a consent order for indefinite suspension of her license with suspension stayed contingent upon Ms. Brown's entry into a contract with the Virginia Health Practitioners' Monitoring Program (HPMP) and comply with all terms and conditions of the HPMP for the period specified by the HPMP in lieu of a formal hearing. The motion was seconded by Ms. Webb-Jones and carried unanimously.

The meeting was adjourned at 4:56 P.M.

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Claire Morris, RN, LNHA  
Executive Director





# Agency Subordinate Recommendation Tracking Trend Log - 2018 to Present – Board of Nursing

C2

Considered		Accepted		Modified*					Rejected					Final Outcome:** Difference from Recommendation				
Date	Total	Total	Total %	Total	Total %	# present	# ↑	# ↓	Total	Total %	# present	# Ref to FH	# Dis-missed	↑	↓	Same	Pend-ing	N/A
<b>Total to Date:</b>	1294	1184	91.5%	89	6.9%	23	66	20	28	2.2%	5	25	3	26	29	21	0	
<b>CY 2026 to Date:</b>	91	82	90.1%	5	5.5%	0	4	1	4	4.4%	1	4	0	0	1	0	0	
May-26	26	22	84.6%	1	3.8%	0	1	0	3	11.5%	0	3	0	0	0	0	0	
Mar-26	65	60	92.3%	4	6.7%	0	3	1	1	1.5%	1	1	0	0	1	0	0	
<b>Annual Totals:</b>																		
Total 2025	91	82	90.1%	5	5.5%	0	4	1	4	4.4%	1	4	0	0	1	0	0	
Total 2024	185	171	92.4%	18	9.7%	7	14	1	3	1.6%	1	3	0	7	6	2	0	
Total 2023	178	161	90.4%	10	5.6%	5	6	4	7	4.0%	1	6	1	5	4	4	0	
Total 2022	140	132	94.3%	4	2.9%	2	2	2	4	2.6%	0	4	0	1	0	0	0	
Total 2021	50	48	96.0%	2	4.0%	0	2	0	0	0.0%	0	0	0	3	4	1	0	
Total 2020	77	69	89.6%	6	7.8%	5	6	0	2	2.6%	0	2	0	4	0	0	N/A	
Total 2019	143	129	90.2%	12	8.4%	0	10	2	2	1.4%	2	0	2	0	0	1	N/A	
Total 2018	200	172	86.0%	24	12.0%	4	17	7	4	2.0%	0	4	0	4	10	7	N/A	

\* Modified = Sanction changed in some way (does not include editorial changes to Findings of Fact or Conclusions of Law. ↑ = additional terms or more severe sanction. ↓ = lesser sanction or impose no sanction.

\*\* Final Outcome Difference = Final Board action/sanction after FH compared to original Agency Subordinate Recommendation that was modified (then appealed by respondent to FH) or was Rejected by Board (& referred to FH).

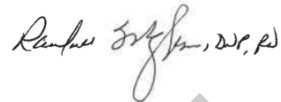
**VIRGINIA COMMITTEE OF THE JOINT BOARDS OF NURSING AND MEDICINE  
BUSINESS MEETING MINUTES  
June 17, 2026**

- TIME AND PLACE:** The meeting of the Committee of the Joint Boards of Nursing and Medicine was called to order at 9:00 A.M., June 17, 2026, in Board Room 2, Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Suite 201, Henrico, Virginia.
- MEMBERS' PRESENT:** Helen M. Parke, DNP, FNP-BC; Board of Nursing - **Chair**  
Carol Cartte, RN, BSN; Board of Nursing  
Blanton Marchese; Board of Medicine Bo  
Vaughan, Jr., MD; Board of Medicine
- STAFF PRESENT:** Claire Morris, R.N., L.N.H.A.; Executive Director; Board of Nursing  
William L. Harp, MD; Executive Director; Board of Medicine  
Randall Mangrum, DNP, R.N.; Deputy Executive Director for Advanced Practice  
Shannon Alexander, Senior Licensing and Discipline Case Specialist
- OTHERS PRESENT:** Sarah Blose, Assistant Attorney General; Board Counsel
- IN THE AUDIENCE:** Dr. Yetty Shobo, Healthcare Workforce Data Center  
Dr. Barbara Hodgdon, Healthcare Workforce Data Center
- INTRODUCTIONS:** Committee members and staff members introduced themselves.
- ESTABLISHMENT OF A QUORUM:** Dr. Parke called the meeting to order and established that a quorum was present.
- PUBLIC COMMENT:** No public comments were received.
- PRESENTATION:** Drs. Shobo and Hodgdon presented the Healthcare Workforce Date Center Advanced Practice Registered Nurse Workforce Survey Reports:
- Virginia's Licensed Advanced Practice Registered Nurse Workforce: 2025
  - Virginia's Licensed Advanced Practice Registered Nurse Workforce: Comparison by Specialty
- ACTION ITEM:** Mr. Marchese moved to accept the HWDC reports as presented. The motion was seconded by Ms. Cartte and carried unanimously.
- Dr. Parke thanked Dr. Shobo and Dr. Hodgdon for the report.

Virginia Committee of the Joint Boards of Nursing and Medicine – Business Meeting June 17, 2026

NEW BUSINESS: No new business

ADJOURNMENT: As there was no additional business, the meeting was adjourned at 9:41 A.M.



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Randall Mangrum, DNP, RN  
Deputy Executive Director for Advanced Practice

DRAFT

**VIRGINIA COMMITTEE OF THE JOINT BOARDS OF NURSING AND MEDICINE**  
**Discipline Meeting**  
**June 17, 2026**

**TIME AND PLACE:** The meeting of the Committee of the Joint Boards of Nursing and Medicine was convened at 9:45 A.M., June 17, 2026, Board Room 2, Suite 201, Department of Health Professions, 9960 Mayland Drive, Henrico, Virginia.

**MEMBERS PRESENT:** Helen M. Parke, DNP, FNP-BC; Board of Nursing; Chair  
Carol Cartte, RN, BSN; Board of Nursing  
Bo Vaughan, Jr., MD; Board of Medicine  
Blanton Marchese; Board of Medicine

**STAFF PRESENT:** Claire Morris, RN, LNHA; Executive Director  
Randall Mangrum, DNP, RN; Deputy Executive Director for Advanced Practice  
Shannon Alexander; Licensing/Discipline Specialist

**ADMINISTRATIVE  
PROCEEDINGS**

**STAFF PRESENT:** Elizabeth Dorsey, Adjudication Specialist  
Piero Mannino, Adjudication Specialist

**OTHERS PRESENT:** Sara Blose, Senior Assistant Attorney General

**ESTABLISHMENT OF  
A QUORUM:** Dr. Parke called the meeting to order and established that a quorum was present.

**CONSIDERATION OF AGENCY SUBORDINATE RECOMMENDATIONS**

**The following Agency Subordinate Recommendations were accepted by the Board as presented:**

**Eun Mi Lee, APRN**

**0024-13806**

Ms. Lee did not appear but submitted a written response.

Mr. Marchese moved that the Committee of the Joint Boards of Nursing and Medicine accept the recommended decision of the agency subordinate to indefinitely suspend the license of Eun Mi Lee to practice as an advanced practice registered nurse in the Commonwealth of Virginia. The motion was seconded by Dr. Vaughan and carried unanimously.

**RECESS:** The Committee recessed at 9:50 A.M.

**RECONVENTION:** The Committee reconvened at 10:03 A.M.

**FORMAL HEARING:** **Amy Mills, APRN 0024-176089**

Ms. Mills appeared.

**WITNESSES PRESENT:** Sherri Oliver, Senior Investigator, Enforcement Division, Sabrina Martin, Rebecca Lockner, Patient B, Patient D were present and testified. Juan Ortega, Court Reporter with Ortega International Reporting, recorded the proceedings.

**RECESS:** The Committee recessed at 12:12 P.M.

**RECONVENTION:** The Committee reconvened at 12:17 P.M.

**CLOSED MEETING:** Mr. Marchese moved that Committee of the Joint Boards of Nursing and Medicine convene a closed meeting pursuant to Section 2.2-3711(A)(27) of the Code of Virginia at 12:21 P.M. for the purpose of deliberation to reach a decision in the matter of Ms. Mills. Additionally, Mr. Marchese moved that Ms. Morris, Dr. Mangrum, Ms. Alexander, and Ms. Blose, Board Counsel, attend the closed meeting because their presence in the closed meeting is deemed necessary, and their presence will aid the Committee in its deliberations. The motion was seconded by Dr. Vaughan and carried unanimously.

**RECONVENTION:** The Committee reconvened in open session at 1:05 P.M.

Mr. Marchese moved that Committee of the Joint Boards of Nursing and Medicine certify that it heard, discussed, or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. The motion was seconded by Dr. Vaughan and carried unanimously.

**ACTION:** Dr. Vaughan moved that the Committee revoke the license of Amy Mills to practice as an advanced practice registered nurse in the Commonwealth of Virginia. The motion was seconded by Mr. Marchese and carried unanimously.

This decision shall be effective upon entry by the Board of a written Order stating the findings, conclusion, and decision of this formal hearing.

**CONFERENCE SCHEDULED:** **Robert Howington, APRN Reinstatement Applicant 0024-166092**

Mr. Howington did not appear.

**ACTION:** Mr. Marchese moved to Issue an Order to approve Robert Howington's Application for Reinstatement of his license to practice as an advanced practice registered nurse. The basis of this decision will be set forth in an Order which will be mailed to Mr. Howington at his address of record with the Board. The motion was seconded and carried unanimously. An Order will be entered. As provided by law, this decision shall become a Final Order thirty days after service of such order on Mr. Howington unless

a written request to the Committee for a Formal Hearing on the allegations made against him is received from Mr. Howington within such time. If service of the Order is made by mail, three additional days shall be added to that period. Upon such timely request for a formal hearing, the Order shall be vacated.

**ADJOURNMENT:** The Committee adjourned at 1:14 P.M.



*Randall Mangrum, D.N.P., R.N.*

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Randall Mangrum, D.N.P., R.N.  
Deputy Executive Director for Advanced Practice

DRAFT

June 4, 2026

TO: Virginia Board of Nursing

FROM: Monique Davis, RN, MPH  
Discipline Case Manager

RE: 2026 NCSBN Discipline Case Management Conference

I had the opportunity to attend the NCSBN Discipline Case Management Conference on May 27-28, 2026, in Rosemont, Illinois. The theme of the conference was "The Power of Evidence."

This year's two-day conference included sessions and discussions related to:

- Ethics & Discipline: Lessons from Sport for Regulatory Boards
- Emerging Drugs, Substance Abuse, and Medication-Assisted Treatment in Nursing
- Confidentiality and Board Disclosures
- Controlled Substance Diversion, Automated Dispensing Machines and Nursing Disciplinary Investigations
- Preparing to Testify: Advanced Preparations and Collaboration Strategies- Part I & II
- Navigating APRN Disciplinary Investigations
- AI Complaint Implementation
- Federal Rescheduling of Marijuana – Implications for State Boards
- APRN- run Med Spas: History New Legislation and Disciplinary Trends
- Social Media Jeopardy: Exploring Professionalism, Free Speech and Confidentiality

Key takeaways from the conference included:

- Ethics & Discipline: Evidence shows that one in four employees witness or are involved in unethical conduct and 60% of misconduct is not reported. The Ethics Drift Curve (justification, repetition, normalization, concealment, and violation) shows that small choices, repeated over time lead to serious consequences. By the time an individual arrives for their hearing their behavior is already entrenched. The question posed is "how do you avoid licensees from taking short cuts?" Focusing on education to remediate their behavior; not only investigating misconduct but also recognizing how it begin and assisting in justifying behavioral changes. The biggest risk isn't the case you're managing; it's the one already forming that no one has reported yet.
- Intervention Project for Nurses (IPN) on Emerging Drugs and Medication-Assisted Treatment in Nursing.
  - Evidence shows that nurses are experiencing maladaptive coping due to stress exceeding resilience. One in five nurses may engage in maladaptive use of substances. Emerging drugs are easily accessible in convenience stores, online and drug markets. These drugs have similar effects to illegal drugs, are extremely unpredictable, and addictive and causes impairment. The challenge for employers

## Monique Davis' report

is an unawareness of what to test for due to unknown ingredients found in these emerging drugs.

- In some nurse monitoring programs medications are being used for substance related disorders. Medication assisted treatment (MAT) are reasonable as they may assist in safe efficacious and quicker return to practice. MAT demonstrates additional recovery support and neurocognitive testing is key prior to returning to work.
- The medical spa session was presented by Texas Board of Nursing and focused on legislation enacted regarding elective IV therapy at med spas after an incident involving a client who died after being administered IV therapy by an unlicensed individual.
  - APRNs and Supervising physicians should have specific cosmetic training and work within their competence and population focus.
  - Many of the supervising physicians are not onsite and are supervising in name only. The presenter posed a question, “Is the supervising physician aware of what is being done under their name?”

**NCSBN: The Power of Evidence  
Discipline Case management Conference  
May 27-28, 2026 @ Rosemont, IL**

**1. Ethics and Discipline: Lessons from Sport for Regulatory Boards**

Similarities between Sports regulations and Licensing Boards.

It starts with minor behavioral changes that escalate using:

Justification (i.e. I'll chart it later) followed by

Small, justifiable deviations; Patterns that get rationalized

Repetition (done it before)

Normalization (Everyone is doing it) ending with

Silence gets interpreted as approval

Patterns before proof

Concealment (need to fix so questions aren't raised) resulting in

Ethics failures don't start at the hearing they start in the blind spots

By the time it's a case, it's already entrenched

Violation / Case

Be Proactive not Reactive

The ethics case investigation is not the right time to figure out a remediation plan

The biggest risk isn't the case you're managing. It's the one already forming that no one has reported yet

Our job isn't just to investigate misconduct. It's to recognize how it begins and to assist in justifying behavioral change

**2. Emerging Drugs, Substance Abuse and Medication-assisted Treatment in Nursing**

Objectives

- A. Recognize prevalence of substance abuse in nursing.
- B. Define Emerging Drugs and recognize types of Emerging Drugs.
- C. Discuss different Emerging Drugs and how they are being used and the prevalence of Cannabis and impact on safety sensitive jobs.
- D. Define and describe Medication for substance use disorders.
- E. Discuss the Intervention Project for Nurses (IPN) and Alternative to Discipline Programs.

Increased Stress, Burnout and Impaired Practice exacerbated these issues

Often, substances are chosen that are readily available, easy to obtain, and ones they believe may not show up on a drug screen

**I. High Prevalence of Substance Abuse and Burnout in Nursing**

- Nursing is a mentally and physically demanding profession, with studies showing that nearly two-thirds (62%) of nurses experience burnout, especially among younger nurses (69% under 25). Burnout and stress are linked to increased substance use, with up to 1 in 5 nurses estimated to engage in maladaptive substance use.

- *Example:* A 2022 national survey found 18% of nurses screened positive for substance use problems, and 6.6% for a substance use disorder, with higher rates in home health/hospice and nursing homes.

## II. **Emergence and Risks of New Psychoactive Substances**

*Emerging drugs:* In 2025 defined by US DHHS as mind-altering substances have become more common in recent years & can be accessible in Drug markets; Convenience Stores, Gas Stations & On-line.

*Emerging Drugs* can have similar effects to illegal or prescription medications such as opioids, stimulants, benzodiazepines or other types of drugs.

- Over 1,000 emerging drugs have been identified globally since 2013, including synthetic cannabinoids (K2/Spice), synthetic opioids (Kratom, Nitazenes), and others like tianeptine and xylazine. These substances are often easy to obtain, hard to detect in routine drug tests, and can have unpredictable, addictive, and impairing effects.
- *Example:* Nitazenes are synthetic opioids more potent than fentanyl, and tianeptine ("gas station heroin") is sold as a supplement but can cause opioid use disorder and dangerous withdrawal symptoms.

## III. **Cannabis Use and Safety Concerns in Nursing**

- Cannabis is the most used federally illegal drug in the U.S., with 52.5 million users in 2021. About 3 in 10 users develop cannabis use disorder. Cannabis impairs memory, learning, and psychomotor skills, posing significant risks in safety-sensitive jobs like nursing. The National Safety Council states there is no safe level of cannabis use for employees in such positions.
- *Example:* Research shows cannabis impacts cognitive ability, and its use is unsafe for nurses due to increased risk of injury or death.

As of February 2024, 24 US states had legalized nonmedical (ie, recreational) and medical cannabis use, with 14 states permitting medical marijuana only.

### **2019 The National Safety Council Position/Policy**

"There is no level of cannabis use that is safe or acceptable for employees who work in safety sensitive positions."

## IV. **Medication-Assisted Treatment (MAT) for Substance Use Disorders in Nurses**

- MAT (e.g., buprenorphine/naloxone, naltrexone) is increasingly used in nurse monitoring programs, though concerns remain about safety and impairment. Successful MAT use requires tools like neurocognitive assessments and increased toxicology testing. These treatments support recovery and a safe return to practice.
- *Example:* Injectable naltrexone (Vivitrol) and buprenorphine/naloxone are preferred for opioid use disorder in monitored nurses, with ongoing monitoring to ensure safety.

## V. **Alternative to Discipline (ATD) Programs and the Intervention Project for Nurses (IPN)**

- ATD programs offer a non-punitive approach to nurses with substance use disorders, focusing on treatment and recovery rather than discipline. 47 of 59 U.S. nursing regulatory bodies have ATD programs. The IPN in Florida provides confidential support, education, and monitoring, helping nurses recover and return to practice safely.
  - *Example:* Nearly 80% of IPN referrals are confidential and voluntary, primarily from employers or self-referrals, supporting both public safety and nurse rehabilitation.
- A. The use of Medications for SUD in nurses, continues to raise debate among regulatory and state monitoring programs
- B. More monitoring programs are allowing for MAT/MOUD use with various stipulations for participants
- C. These treatments have demonstrated additional recovery support and ongoing sobriety

**NEEDS:**

- A. Decrease stigma
- B. It is essential for the safety of patients, the nurse's own health, and the wellness of the nursing workforce that they be able to get the help they desperately need.
- C. Encourage them to get help because recovery is possible

**“Though no one can go back and make a brand-new start, anyone can start from now and make a brand-new ending.”**

### **3. Confidentiality and Board Disclosures**

Balance of *Public Record* vs *Confidential*

*Confidential:* Any records or information obtained during the course of an investigation by the Board and any records of the investigation

*Public Record:* The complaint or other document filed by the Board to initiate disciplinary action and all the documents and information considered by the Board when determining whether to impose disciplinary action

Federal & State Laws including HIPAA play a big part in what can and can't be disclose or if it should even be disclosed.

Know your Privacy Rules; what is a Covered Entity and how a Consent or Court Order allow or prohibition disclosure.

### **4. Navigating APRN Disciplinary Investigations**

Based upon Kentucky Board of Nursing laws, regulations & procedures

1. **Purpose and Mission of the Kentucky Board of Nursing:** The Board's primary mission is to protect the public by developing and enforcing state laws governing the safe practice of nurses, including APRNs. This is achieved through education, research, discipline, and monitoring. This foundational purpose guides all disciplinary investigations and actions.

2. **Structured and Fair Investigation Process:** Every complaint against an APRN follows a standardized investigation process. This includes reviewing the complaint, gathering evidence, sending a Notice of Complaint to the APRN, reviewing responses and documentation, and determining if a violation occurred. The process ensures fairness and consistency in handling all cases.
3. **Range of Possible Outcomes:** Not all complaints result in disciplinary action. Outcomes can include closure (if unsubstantiated), a Letter of Concern (not disciplinary), Consent Decree (informal action), Agreed Order (formal disciplinary action), immediate temporary suspension (for urgent public safety concerns), or a formal administrative hearing. The outcome depends on the severity and nature of the violation.
4. **Common Violations Leading to Discipline:** Frequent issues include prescribing controlled substances outside of guidelines, incomplete or missing documentation, boundary violations, not reporting convictions, and working without a valid license. Awareness of these pitfalls helps APRNs avoid actions that could trigger investigations.
5. **Importance of Evidence-Based Practice and Documentation:** APRNs must base patient care and prescribing decisions on evidence-based guidelines and maintain thorough documentation. Proper documentation is critical in defending against complaints and demonstrating compliance with professional standards.

These points are essential for understanding the disciplinary process, the responsibilities of APRNs, and the standards enforced by the Kentucky Board of Nursing.

Key Takeaways:

- Not all complaints result in discipline
- Use the same Investigation Process for every case
- Investigations should be structured and fair
- Prescribing/Patient care decisions must follow evidence-based guidelines

**5. AI Complaint Implementation**

Discusses the integration of AI into healthcare regulation, emphasizing ethical use, oversight, bias mitigation, and practical implementation strategies.

Recommendations and guidance in the ethical and responsible AI use, focusing on regulations, transparency and accountability.

- A. The Evolution & Current Capabilities of AI
  - a. Rapidly advancing with decreasing costs
  - b. Correct own mistakes with minimal costs
- B. Use in Disciplinary Case Management
  - a. Complaint triage, medical record review & generating structured case summaries.
  - b. Extraction of data from complex records & flag concerns
- C. Ethical, Bias & Transparency Considerations

- a. Bias can enter thru training data, prompt framing, reviewer & feedback loops
- b. Strategies should include dual human review, quarterly audits & structured prompts
- c. Disclosing AI use to licensees, public & within policies
- d. Protecting identity & preventing impersonation are key principles in AI generated content.

D. Use in Regulatory and Policy Environment

6. **Federal Rescheduling of Marijuana – Implications for State Boards**

Discusses federal initiatives, legal changes, and impacts related to the rescheduling of marijuana from Schedule I to Schedule III, including research, medical use, and professional licensing considerations.

**Federal Initiatives to Reschedule Marijuana**

- The DEA proposed to reschedule marijuana from Schedule I to Schedule III on May 21, 2024.
- Rescheduling would recognize medical use and lower abuse potential but not legalize recreational use nationwide.
- The process involves public comments, hearings, and executive orders to expedite the change.
- Rescheduling aims to improve research, reduce penalties, and align federal law with state medical programs.

**DEA and Executive Orders on Marijuana Rescheduling**

- The DEA's 2024 proposal and 2026 final rule aim to reclassify marijuana based on scientific and treaty obligations.
- Executive Order 14370 and 14730 direct agencies to expand research and expedite rescheduling.
- The 2026 final rule allows FDA-approved marijuana products and state-licensed medical marijuana to be placed in Schedule III.
- These actions facilitate research, reduce federal penalties, and recognize medical use without legalizing recreational cannabis.

**Impact on Medical and State Marijuana Programs**

- Rescheduling affirms medical use and may lead to better clinical standards and dosing guidance.
- States retain primary authority over medical marijuana programs, and existing patient certifications remain valid.
- State licensing and dispensing models are unaffected, but there may be increased physician participation.
- State professional boards can continue drug testing and discipline based on state laws, regardless of federal rescheduling.

**Research, Product Development, and Industry Effects**

- Rescheduling is expected to accelerate research and improve access to study-grade cannabis.

- It may lead to clearer distinctions between medical, adult-use, and recreational products.
- Dispensaries might create medical only lines and upgrade quality assurance protocols.
- Federal recognition could boost investment, market consolidation, and product credibility.

### **CBD, Hemp, and Regulatory Frameworks**

## **7. APRN-Run Med Spas: History, New Legislation, and Disciplinary Trends**

An overview of the growth, regulation, legal challenges, and disciplinary trends in the Texas med spa industry, focusing on legislative changes and professional standards.

### **Rise and Growth of the Medical Spa Industry**

- The med spa industry in the U.S. emerged in the late 1990s as a hybrid of day spas and outpatient clinics.
- The industry expanded rapidly after FDA approval of Botox in 2002, reaching over 10,000 med spas in 2023.
- Revenue grew from \$17 billion in 2004 to over \$1.1 billion in 2010, with average APRN salaries around \$130,000 in 2023.
- Industry challenges include ownership ambiguity, scope of practice confusion, and regulatory lag.

### **Regulatory Framework and Challenges**

- Federal agencies like HIPAA, OSHA, FDA, and FTC regulate different aspects of med spa operations.
- State regulations vary, with Texas governed by multiple bodies including the Texas Medical Board and Board of Nursing.
- Texas previously used Rule 193.17 for med spa regulation, which was replaced in 2025 by new rules under Chapter 169.
- The new rules clarify delegation, supervision, and operational standards for med spas.

### **Impact of Jenifer Cleveland Tragedy**

- Cleveland, a patient at Luxe Med Spa, died after unlicensed IV therapy administered by an unlicensed provider.
- The case exposed issues like lack of medical director oversight, absence of protocols, and unlicensed staff performing medical procedures.
- It prompted legislative and regulatory scrutiny to improve safety standards.

### **Legislative Changes and HB 3749**

- Filed in March 2025, HB 3749 initially proposed strict restrictions, including on-site physician presence and limiting scope for APRNs and PAs.
- The bill faced significant industry opposition, leading to amendments that focused solely on elective IV therapy.
- The final law, effective September 2025, restricts IV therapy to licensed professionals and mandates protocols and supervision.
- It emphasizes physician oversight, delegation, and on-site supervision for elective IV procedures.

### **Current Regulatory Landscape in Texas**



E2

*COMMONWEALTH of VIRGINIA*

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MEMORANDUM

To: Board Members

From: Jacquelyn Wilmoth, RN, MSN  
Deputy Executive Director

Date: July 6, 2026

Subject: Medication Aide Exam Length

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PSI has completed its feasibility review of the Medication Aide examination in response to the Board's ongoing efforts to understand and address the persistently low pass rates and to mitigate any potential factors contributing to candidate failure. The current examination includes 80 scored questions and 5 pretest items. As part of the study, PSI evaluated whether the exam could be shortened while maintaining statistical reliability and content validity.

Based on their analysis, PSI has recommended reducing the exam to 60 scored questions and increasing the number of pretest items to 10. Their findings indicate that this shortened exam structure would remain psychometrically sound and continue to meet required standards for competency assessment.

The Board's action needed at this time is a vote to either retain the existing exam length or adopt PSI's recommendation to shorten the exam.



# Exam Length Feasibility Study

**VERSION:** 1.0

**DATE:** June 16, 2026

**CLASSIFICATION:** Confidential

**AUTHORS:**  
Oscar Rios

## Revision History

VERSION	DATE	COMMENTS
1.0	June 22, 2026	Document creation.

## Approval Section

NAME	POSITION	SIGNATURE	DATE

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## Contents

1. Executive Summary	3
2. Study Purpose, Research Questions, and Analytic Scope	4
3. Psychometric Impact of Test Length Reduction: Reliability, Precision, and Classification Outcomes	6
4. Content Coverage and Blueprint Representation	11
5. Candidate Timing Analysis Plan	12
6. Feasibility Decision Framework	16

# 1. Executive Summary

This study evaluates the feasibility of reducing the scored length of the Virginia Registered Medication Aide (RMA) examination from 80 items to 60 items. The analysis considers the impact of this reduction on score reliability, measurement precision, classification consistency, content coverage, and candidate testing time.

**Overall Recommendation:**

Reducing the examination to 60 scored items is feasible with minimal risk.

**Key Findings:**

Psychometric analyses indicate that the shortened 60-item form maintains acceptable measurement quality. Simulated reliability remains above commonly accepted thresholds (0.775 vs. 0.821 at 80 items), and decision consistency declines only modestly (80.7% vs. 82.1%). Classification agreement with the current 80-item standard remains high at 90.6%, indicating that over 90% of candidates would receive the same pass/fail outcome under the shorter form.

Measurement precision is slightly reduced, as expected with shorter forms, but remains sufficient to support defensible pass/fail decisions. Estimated classification error rates are low, with approximately 4% false positives and 5.3% false negatives at 60 items.

Content coverage is preserved through proportional blueprint scaling, ensuring that all major domains remain represented in the shortened form.

Operational analysis further demonstrates that the current exam is not speeded, with candidates using approximately 58% of allotted testing time on average, suggesting that a shorter exam would reduce testing fatigue without introducing time pressure.

**Primary Risks:**

The proposed reduction introduces modest trade-offs, including slight decreases in reliability, reduced precision, and small increases in classification error rates. These include both false positive and false negative outcomes. The shorter form is slightly more likely to produce false negatives (failing candidates who would have passed at full length) than false positives.

# 2. Study Purpose, Research Questions, and Analytic Scope

## 2.1 Background and Rationale

Test length reduction is under active consideration for the Virginia Registered Medication Aide (RMA) examination, reflecting a broader, ongoing dialogue in high-stakes licensure and certification testing regarding the appropriate balance among measurement precision, content representation, candidate fatigue, and program efficiency. The present study evaluates whether reducing the scored length of the Virginia RMA examination from 80 to 60 items preserves the psychometric integrity required for defensible pass/fail decision-making, consistent with the *Standards for Educational and Psychological Testing* (AERA, APA, & NCME, 2014).

## 2.2 Study Purpose

The purpose of this study is to provide an empirically grounded recommendation regarding the operational viability of a 60-item scored examination as a replacement for the current 80-item scored examination. The study integrates four lines of evidence:

- **Reliability:** KR-20 estimates under simulated shortened forms, with Spearman-Brown projections as a confirmatory cross-check.
- **Precision:** Standard error of measurement (SEM) at full and reduced test lengths.
- **Classification:** Decision consistency, classification agreement with the operational 80-item decision, and estimated false positive and false negative rates.
- **Operational:** Timing data describing candidate testing experience and the practical impact of a shorter form.

Together, these analyses are intended to support a defensible, evidence-based recommendation to retain, modify, or adopt the 60-item configuration.

## 2.3. Research Questions

The study is designed to answer the following questions:

- Does a 60-item scored test maintain acceptable reliability compared with the current 80-item scored test?
- How often would candidate pass/fail classifications change under simulated 60-item versions of the test?
- What are the estimated false positive and false negative rates when the 80-item decision is used as the operational reference classification?
- Does the reduced-length exam preserve the intended content coverage and blueprint representation?

- How much time do candidates currently spend on the exam, and would a shorter exam materially reduce candidate testing fatigue?
- Is the 60-item model defensible for operational use, or should 80 scored items be retained?

## 2.4 Scope, Data, and Assumptions

The analytic scope is defined by the parameters in Table 1.

Table 1. Study Design Parameters

Study Parameters	Value
Population	Overall, First-time, Repeater
Exam window	January 1, 2024 – June 14, 2026
Current scored length	80 scored items
Proposed scored length	60 scored items
Pretest / experimental items	Excluded from reliability and classification analyses; included in timing analysis for total candidate experience
Cut score	57/80 [71.25%]
Data sources	Candidate-level results, scored item responses, form ID, examination blueprint
Reference classification	Operational 80-item pass/fail decision unless otherwise specified

# 3. Psychometric Impact of Test Length Reduction: Reliability, Precision, and Classification Outcomes

## 3.1 Overview

This chapter presents the psychometric impact of reducing the operational examination from 80 to 60 scored items. Three lines of evidence are reported: (a) baseline reliability and precision indices for the current 80-item form, (b) Monte Carlo simulation results across candidate reduced lengths (70, 60, 50, 40 items), and (c) classification consistency between the simulated short forms and the operational 80-item decision.

## 3.2 Baseline 80-Item Results

Baseline indices are computed from complete 80-item records within the study window. Reliability and SEM are calculated within each FormID and Attempt\_Group, then candidate-weighted to produce population-level estimates.

Table 2. Baseline 80-Item Results

Metric	Overall	First-Time	Repeater	
<b>N candidates</b>	4123	2677	1445	Complete 80-item records only.
<b>Mean raw score</b>	56.81	57.76	55.02	Mean observed raw score on the current 80 scored items.
<b>SD raw score</b>	8.41	8.79	7.35	Standard deviation of observed raw scores.
<b>Pass rate</b>	53.2%	58.4%	43.4%	Pass rate based on the operational Result column in the raw data.
<b>KR-20 / coefficient alpha</b>	0.809	0.83	0.73	Reliability is calculated within each FormID and Attempt_Group, then candidate-weighted.
<b>SEM</b>	3.65	3.58	3.75	SEM is calculated within each FormID and Attempt_Group, then candidate-weighted.
<b>Decision consistency</b>	81.6%	83.6%	78%	Decision consistency estimated via unconditional $p^2 + q^2$ method using KR-20-derived SEM.

Reliability for the overall and first-time populations exceeds 0.80, comfortably above the 0.70 threshold widely cited as the minimum acceptable standard for licensure and credentialing examinations. The repeater subgroup exhibits the expected attenuation in reliability (0.730) driven by restricted score variance, a well-documented characteristic of retest populations rather than an indication of item-level deficiency (Lord & Novick, 1968).

## 3.3 Simulation Design

### Simulation Results: Impact of Test Length Reduction

A Monte Carlo simulation was conducted to evaluate the psychometric impact of reducing the scored test length to 70, 60, 50, and 40 items. Five hundred independent item samples were drawn for each target length from the largest first-time candidate form. Pretest items were excluded; sampling was without replacement from the operational scored item pool. Simulation error at 500 replications is negligible for the indices reported.

For each replication and target length, the proportional cut score was applied using:

$$\text{Adjusted Cut} = \text{round} \left( \text{Length} \times \frac{57}{80} \right)$$

producing adjusted cut scores of 50, 43, 36, and 28 for the 70-, 60-, 50-, and 40-item configurations, respectively.

## 3.4 Simulation Results Across Reduced Lengths

Table 3 summarizes simulation outcomes across all evaluated lengths. Detailed narrative interpretation for each metric follows.

Table 3. Monte Carlo Simulation Results

Metric	80 Items	70 Items	60 Items	50 Items	40 Items	Notes
<b>Adjusted cut score</b>	57	50	43	36	28	Proportional cut: round(length x 57/80).
<b>KR-20 (SB Predicted)</b>	0.821	0.801	0.775	0.741	0.696	Spearman-Brown prophecy formula prediction.
<b>KR-20 (Simulated Mean)</b>	0.821	0.801	0.775	0.741	0.694	Mean KR-20 across 500 random item samples.
<b>SEM</b>	3.62	3.39	3.14	2.86	2.56	Mean standard error of measurement across simulations.
<b>Decision consistency</b>	82.1%	81.5%	80.7%	79.8%	79.4%	Unconditional $p^2 + q^2$ method using KR-20- derived SEM.
<b>Classification agreement with 80-item standard</b>	Baseline	93.2%	90.6%	88.2%	85.4%	Proportion of candidates receiving same pass/fail as 80- item form.
<b>False positive rate</b>		3%	4%	5.3%	10.1%	Proportion classified as pass on short form but fail on full form.
<b>False negative rate</b>		3.8%	5.3%	6.5%	4.5%	Proportion classified as fail on short form but pass on full form.

### 3.4.1 Reliability

Simulated mean KR-20 values closely tracked Spearman-Brown predictions at every target length, confirming that the prophecy formula provides an accurate forecast for this item pool. Reliability declined from 0.821 at 80 items to 0.775 at 60 items and 0.694 at 40 items. The 60-item form retains reliability above the 0.70 threshold widely regarded as the minimum acceptable standard for licensure and credentialing examinations. At 50 items (0.741) the margin narrows, and at 40 items the estimate falls below 0.70, indicating that reductions beyond 60 items carry meaningful risk to measurement precision.

### 3.4.2 Standard Error of Measurement

SEM decreased from 3.62 score points on the 80-item exam to 3.14 on the 60-item exam. This decline does not indicate that the shorter exam is more precise. A shorter exam with a smaller possible score range will naturally produce a smaller SEM. When interpreted relative to the score scale, measurement precision is modestly reduced. The relationship between SEM, score variability, and reliability is given by:

$$SEM = SD \times \sqrt{1 - KR_{20}}$$

In practical terms, the 60-item exam continues to produce accurate, defensible scores for candidates.

### 3.4.3 Decision Consistency

Estimated via the unconditional  $p^2 + q^2$  method, decision consistency declined gradually from 82.1% at 80 items to 80.7% at 60 items. This 1.4 percentage-point reduction is modest and indicates that the 60-item form would produce substantially similar pass/fail decisions to a hypothetical parallel form of the same length. Below 60 items, decision consistency drops below the 80% threshold at 50 items (79.8%) and 40 items (79.4%).

Decision consistency was estimated using the unconditional  $p^2 + q^2$  method (Subkoviak (1976) and further examined by Brennan and Lee (2006), defined as:

$$DC = \frac{1}{N} \sum_{i=1}^N [p_i^2 + (1 - p_i)^2]$$

where  $p_i$  is the probability that candidate  $i$  would pass a hypothetical parallel form of the same length, estimated from the candidate's observed score and the KR-20–derived standard error of measurement:

$$p_i = 1 - \Phi\left(\frac{c - 0.5 - X_i}{SEM}\right)$$

where  $X_i$  is the candidate's observed raw score,  $c$  is the cut score, and  $\Phi$  is the standard normal cumulative distribution function. This formulation uses a normal approximation to the conditional score distribution based on classical test theory assumptions regarding measurement error (Lord & Novick, 1968). The continuity correction of 0.5 accounts for the discrete nature of raw scores when applying a continuous normal approximation.

### 3.4.4 Classification Agreement with the 80-Item Standard

This metric directly answers the operational question: *how many candidates would receive a different outcome on the shorter form?* At 60 items, 90.6% of candidates received the same pass/fail decision as on the operational 80-item form. Approximately 4.0% were false

positives (passing the 60-item form but failing at full length) and 5.3% were false negatives (failing the shorter form despite passing at full length). At 70 items, agreement rises to 93.2% with only 3.0% false positives and 3.8% false negatives. Conversely, reducing to 40 items drops agreement to 85.4%, with a notably elevated false positive rate of 10.1%.

### 3.4.4.1 Methodological Derivations

Classification Agreement was computed as:

$$CA = \frac{1}{N} \sum_{i=1}^N \mathbb{I}(D_i^{\text{short}} = D_i^{\text{full}})$$

where  $D_i^{\text{short}}$  and  $D_i^{\text{full}}$  are the pass/fail decisions for candidate  $i$  on the simulated short form and the operational 80-item form, respectively, and  $\mathbb{I}$  is an indicator function equal to 1 when the two decisions match and 0 otherwise. Decisions are defined as:

$$D_i^{\text{full}} = \mathbb{I}(X_i^{\text{full}} \geq 57), D_i^{\text{short}} = \mathbb{I}(X_i^{\text{short}} \geq c^{\text{short}})$$

where  $X_i^{\text{full}}$  and  $X_i^{\text{short}}$  are the candidate's raw scores on the full and short forms, and  $c^{\text{short}}$  is the proportionally adjusted cut score for the reduced length (e.g., 43 for a 60-item form).

Classification errors were partitioned into two complementary rates:

$$FP = \frac{1}{N} \sum_{i=1}^N \mathbb{I}(D_i^{\text{short}} = 1 \cap D_i^{\text{full}} = 0)$$

$$FN = \frac{1}{N} \sum_{i=1}^N \mathbb{I}(D_i^{\text{short}} = 0 \cap D_i^{\text{full}} = 1)$$

where FP (false positive rate) captures candidates who would pass the shorter form but fail at full length, and FN (false negative rate) captures candidates who would fail the shorter form despite passing at full length. By construction,  $CA + FP + FN = 1$ .

### 3.4.5 Asymmetry in Classification Errors

False negative rates consistently exceeded false positive rates at the 60- and 50-item lengths, meaning the shorter form is marginally more likely to fail a candidate who would have passed at full length than to pass one who would have failed. This pattern reflects the interaction between the proportional cut score and the score distribution around the pass/fail boundary. At 40 items, this relationship reverses; the false positive rate (10.1%) substantially exceeds the false negative rate (4.5%).

## 3.5 Summary

A reduction from 80 to 60 items preserves reliability above 0.70, maintains decision consistency above 80%, and produces classification agreement above 90% relative to the operational 80-item standard. Reductions beyond 60 items introduce progressively greater risk to both measurement precision and classification accuracy: reliability falls below the 0.70 floor at 40 items, decision consistency drops below 80% at 50 items, and classification error rates rise materially. The 60-item configuration thus represents the most defensible reduction target, balancing psychometric rigor against the operational benefits of a shorter examination. These findings are integrated with content-coverage and timing evidence in Chapter 4 and 5 to support the overall operational recommendation.

## 4. Content Coverage and Blueprint Representation

Any reduction in test length must preserve the validity argument established through the approved content outline. Accordingly, the proposed 60-item configuration was derived to maintain proportional representation of each domain, while ensuring that all content areas remain adequately sampled.

The table below summarizes the translation of blueprint targets from the current 80-item form to the proposed 60-item form:

Table 4. 80-Item vs. 60-Item Content Distribution

Domain / Content Area	Current 80-Item Target	Proposed 60-Item Target	Difference
<b>LEGAL AND ETHICAL ISSUES</b>	7	5	2
<b>PREPARING FOR SAFE ADMINISTRATION OF MEDICATIONS</b>	11	8	3
<b>THE BASICS OF MEDICATION ADMINISTRATION</b>	18	14	4
<b>ADMINISTRATION OF PREPARED INSTILLATIONS AND TREATMENTS</b>	18	14	4
<b>STORAGE AND DISPOSAL OF MEDICATION</b>	6	4	2
<b>SPECIAL ISSUES IN MEDICATION ADMINISTRATION</b>	11	8	3
<b>INSULIN ADMINISTRATION</b>	9	7	2
<b>Total</b>	80	60	20

The 60-item targets were calculated using proportional scaling of the 80-item blueprint (i.e., multiplying each domain weight by 0.75), followed by controlled rounding to whole integers. Rounding decisions were made to preserve the relative weight of each domain while ensuring the total equals 60 items. Minor adjustments were applied where necessary to maintain alignment with content priorities and to avoid systematic underrepresentation of any domain.

# 5. Candidate Timing Analysis Plan

The timing study evaluates whether candidates are utilizing the allocated testing time, whether the exam exhibits signs of speededness, and how a reduced-length form may affect candidate fatigue and overall testing duration. Timing metrics are summarized at the candidate level and disaggregated by attempt type (first-time vs. repeat candidates).

Table 5. Candidate Testing Time Metrics: Overall, First-Time, and Repeaters

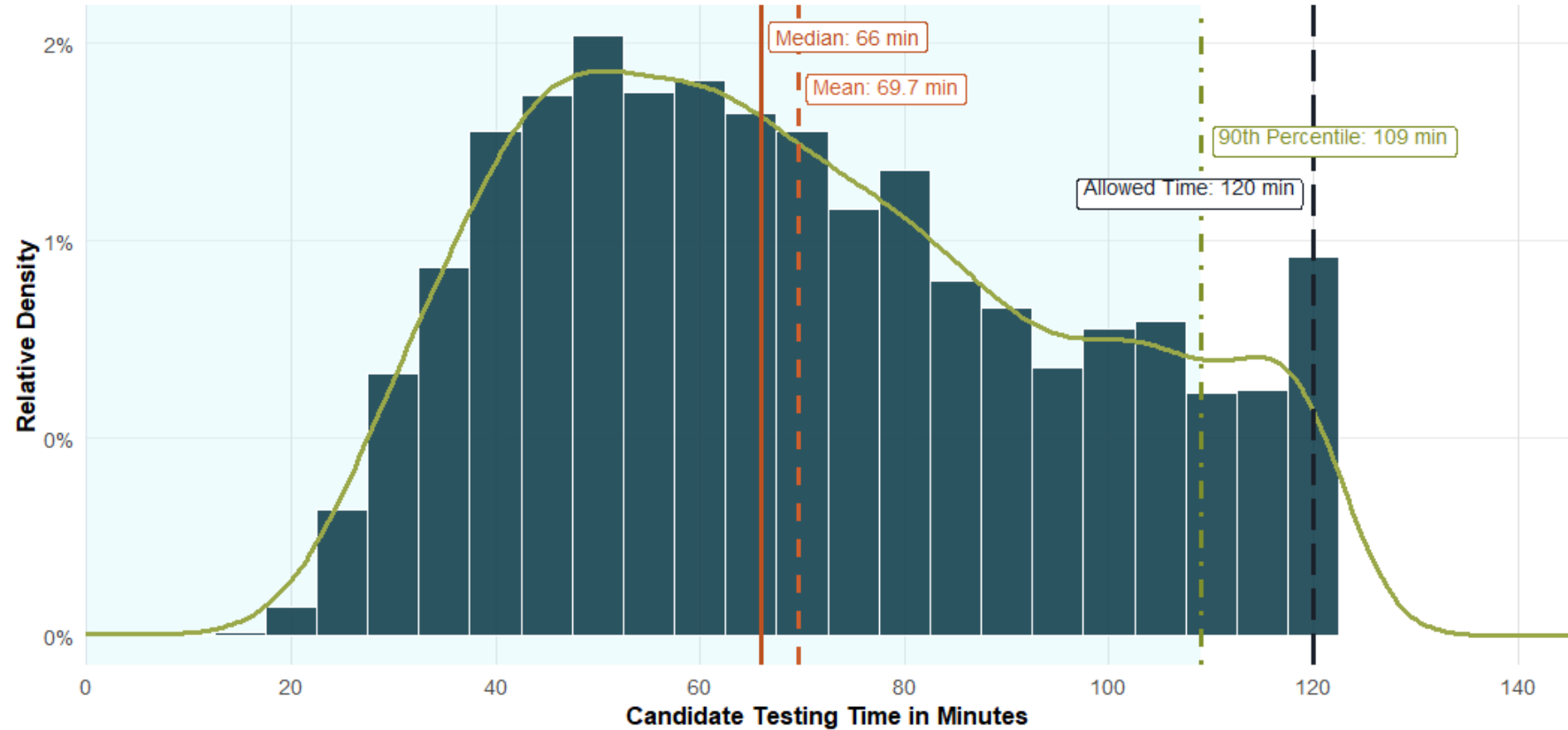
Statistic	Overall	First-Time	Repeater
Number of candidates	4,123	2,677	1,445
Mean testing time (minutes)	69.7	67.4	73.8
Median testing time (minutes)	66.0	63.0	71.0
Standard deviation (minutes)	26.0	25.9	25.8
Minimum testing time (minutes)	0.0	0.0	21.0
25th percentile (minutes)	48.0	47.0	52.0
75th percentile (minutes)	89.0	86.0	95.0
90th percentile (minutes)	109.0	107.0	112.0
95th percentile (minutes)	117.0	116.0	118.0
Maximum testing time (minutes)	147.0	122.0	147.0
Mean percent of allowed time used	58.0%	56.2%	61.5%

## Key Findings

- Candidates use just over half of the allotted testing time on average (58%), indicating that the exam is not speeded for the majority of test takers.
- Repeat candidates consistently require more time than first-time candidates (approximately 6 minutes longer on average), suggesting differences in test-taking approach or candidate proficiency.
- Upper-percentile statistics (90th–95th) indicate that a small proportion of candidates approach the time limit; however, these remain well below the maximum allowed time for nearly all administrations.

### All Candidate Time-on-Test Distribution

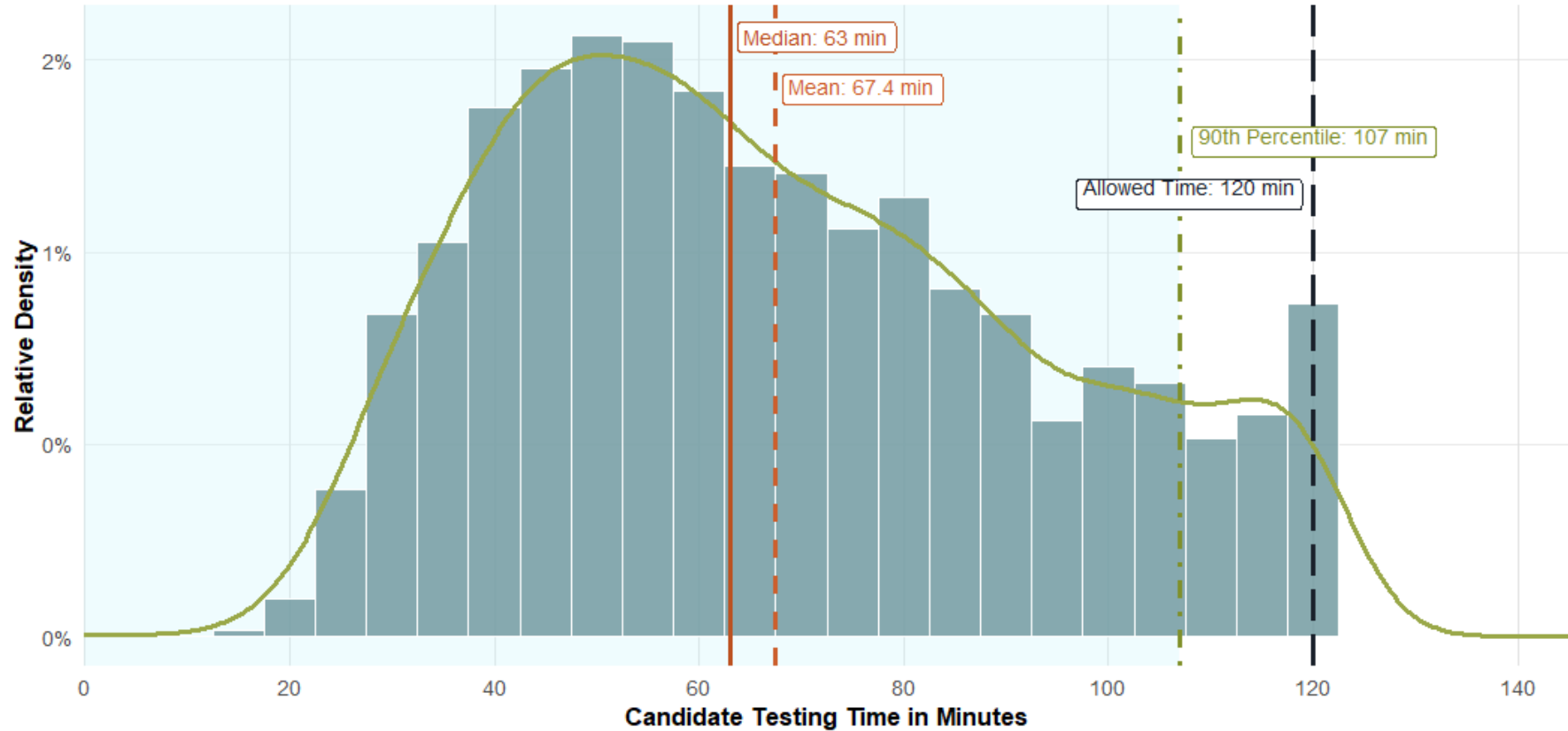
Shaded region represents candidates within the 90th percentile of testing time



Vertical lines indicate median (orange), mean (light orange), 90th percentile (olive), and allowed exam duration (black).

### First-Time Candidate Time-on-Test Distribution

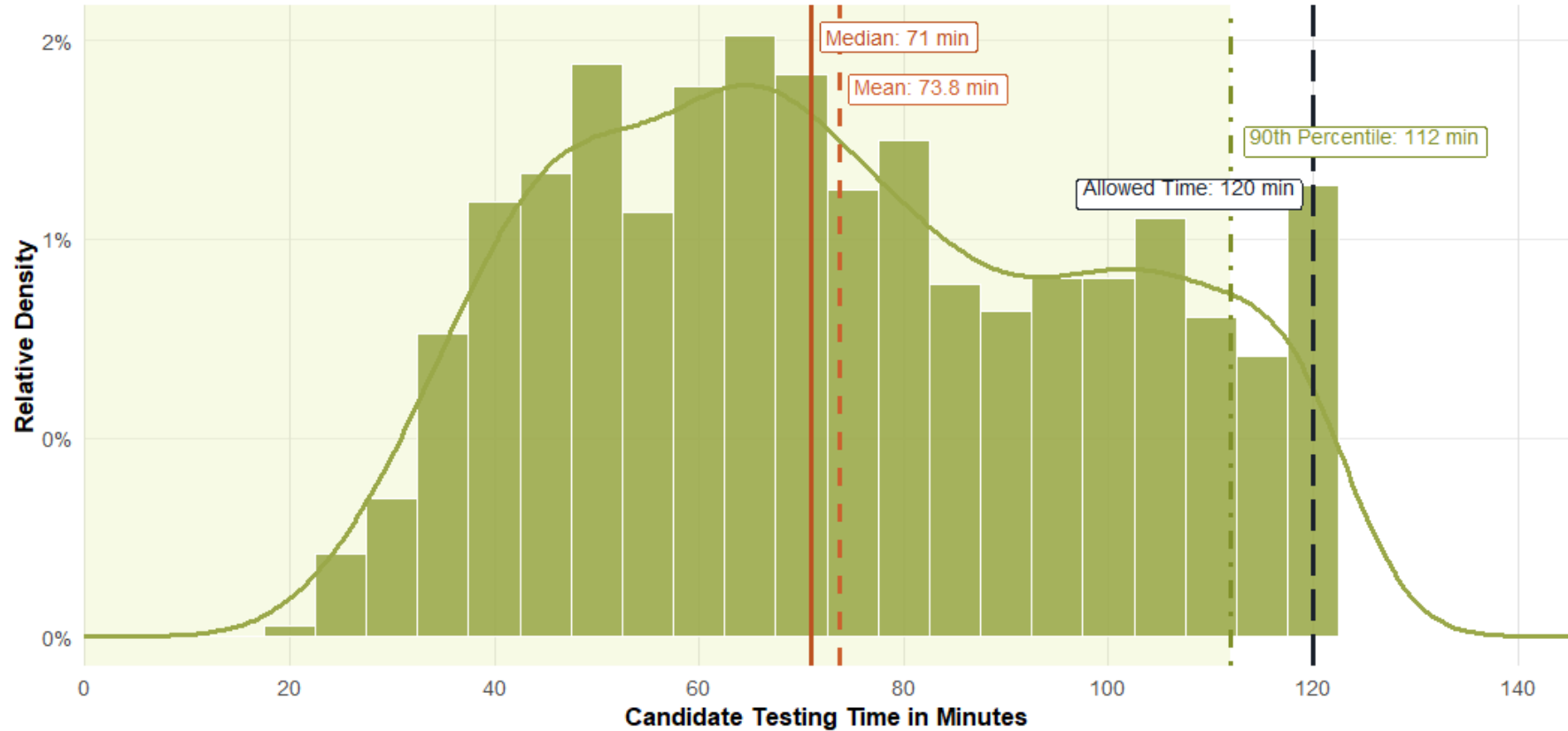
Shaded region represents candidates within the 90th percentile of testing time



Vertical lines indicate median (orange), mean (light orange), 90th percentile (olive), and allowed exam duration (black).

## Repeater Candidate Time-on-Test Distribution

Shaded region represents candidates within the 90th percentile of testing time



Vertical lines indicate median (orange), mean (light orange), 90th percentile (olive), and allowed exam duration (black).

# 6. Feasibility Decision Framework

The following rubric translates statistical and operational evidence into a defensible recommendation. Each evidence area is evaluated as Yes (meets requirement) or No (does not meet requirement) based on the results of the analyses.

Table 6. Summary of Evidence Supporting 60-Item Exam Feasibility

Evidence Area	Decision Criterion (Yes = Meets Requirement)	Observed Result	Meets Criteria (Yes/No)
<b>Reliability</b>	60-item reliability remains $\geq 0.70$ and reasonably aligned with the 80-item baseline	0.775 (vs. 0.821 baseline)	Yes
<b>SEM</b>	Measurement precision at the cut score remains acceptable with no material degradation	Modest relative loss; acceptable	Yes
<b>Classification</b>	Classification agreement $\geq 90\%$ with acceptable false positive/negative rates	90.6% agreement; low FP/FN	Yes
<b>Content Coverage</b>	Blueprint coverage is preserved across all critical domains	Maintained via proportional scaling	Yes
<b>Timing</b>	No evidence of speededness	Not speeded; excess time available	Yes

## Recommendation

Based on the simulation results, reducing the examination from 80 to 60 scored items appears psychometrically defensible. The 60-item simulations produced an average reliability of approximately 0.775, compared with the current 80-item reliability of 0.821. Measurement precision remains acceptable, with only a modest reduction. Classification agreement with the 80-item standard remains high at 90.6%, with relatively low false positive and false negative rates.

Taken together, these findings indicate that the 60-item configuration maintains sufficient reliability, precision, and classification consistency to support defensible pass/fail decision-making, while also offering potential operational and candidate experience benefits.

# References

Brennan, R. L., & Lee, W.-C. (2006). Correcting for bias in estimates of decision consistency from a single administration. *Educational and Psychological Measurement*, 66(6), 1003–1014.

Lord, F. M., & Novick, M. R. (1968). *Statistical theories of mental test scores*. Addison-Wesley.

Subkoviak, M. J. (1976). Estimating reliability from a single administration of a criterion-referenced test. *Journal of Educational Measurement*, 265-276.



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**VIRGINIA BOARD OF NURSING  
EDUCATION SPECIAL CONFERENCE COMMITTEE  
Wednesday, June 17, 2026**

**E1**

Department of Health Professions – Perimeter Center  
9960 Mayland Drive, Conference Center 201 – **Board Room 4**  
Henrico, Virginia 23233

**TIME AND PLACE:** The meeting of the Education Special Conference Committee was convened at 9:00 a.m. in Suite 201, Department of Health Professions, 9960 Mayland Drive, Second Floor, Board Room 4, Henrico, Virginia.

**MEMBERS PRESENT:** Pamela Davis, LPN, Chair  
Cleopatra Kitt, PhD, Citizen Member

**STAFF PRESENT:** Jacquelyn Wilmoth, MSN, RN, Deputy Executive Director

**Medical Learning Center – Fairfax – Medication Aide Education Program, 0030000234**

No representatives for the program were present.

Mr. Timberlake provided information regarding mailing of the Board notice. Based upon information provided by Mr. Timberlake, Ms. Davis ruled that adequate notice was provided to Medical Learning Center.

**ACTION:** Dr. Kitt moved to recommend to withdraw approval of the Medication Aide Education program at Medical Learning Center.

The motion was seconded and carried unanimously.

This recommendation will be presented to the Board on July 21, 2026.

Meeting adjourned at 9:07 a.m.

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Jacquelyn Wilmoth, MSN, RN  
Deputy Executive Director