# SUMMARY SUSPENSION AND REVOCATION OF LPN LICENSE BY BOARD OF NURSING SUPPORTED BY LPN CONDUCT

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# **Avoiding Liability Bulletin - June 2025**

A board of nursing is granted many powers surrounding the licensure of RNs and LPNs. One such power is the authority to temporarily but immediately summarily suspend a licensee's license when the holder poses an immediate threat to the safety, health or welfare of the public. It is seen as an emergency proceeding.

If a <u>summary suspension</u> is taken by the board, it must provide a hearing within the time limit specified in the nurse practice act to determine whether the summary suspension should continue based on the evidence presented at the hearing.

This hearing is mandated by due process protections afforded licensees, including LPNs, under the 14<sup>th</sup> Amendment of the United States and respective state Constitutions. Due process protections in such proceedings include a notice of the hearing, an opportunity to be heard, and a neutral decision-maker.

In the following case before the Virginia Board of Nursing (Stephanie R. Brown, LPN, Case Number 239266, March 31, 2025), these protections were clearly afforded to the LPN whose inexcusable conduct was at issue before the board.

### Facts Prior to the Board Hearing

The LPN was licensed in Virginia in 2014. During her employment at a nursing home, she allegedly conducted herself unprofessionally, abused a patient, and practiced unethically. This conduct resulted in a danger to the health and welfare of patients, in one instance spraying a patient in the face with mace. The spraying incident was witnessed by several employees.

Specifically, the witnesses submitted the following statements:

Witness 1, a CNA, assigned to care for Patient A with a diagnosis of anoxic brain injury and who
used a walker, saw the patient stop at medication cart and reach for an empty medication cup.
The LPN yelled at the patient, screaming explicatives. The witness went to the patient but the
LPN then sprayed the patient with mace for approximately 5 seconds. The patient was frightened
and asked that the witness not leave him alone. The witness said the patient did not pose an

immediate threat to the LPN or anyone else.

- Witness 2, a CNA, witnessed and substantiated the above incident and further stated that the LPN did not check on the patient after the macing but continued to pass her medications, and again yelled explicatives to the patient.
- Witness 3, a nurse, also witnessed the incident, and the LPN did not give the patient any further warnings after the first macing.

The patient was taken to a nearby hospital via ambulance where he was treated for the toxic effect of "lacrimogenic gas, assault, and ocular pain, bilateral."

The police were notified of the incident. The responding police officer noticed the patient's redness around his eyes, removed the LPN in police custody, and charged her with one count of "felony assault, malicious bodily injury by means of a caustic substance", and the state Adult Protective Services founded a report for physical abuse against the LPN.

#### **Board Determination**

The LPN's license was <u>revoked</u>. This revocation included not only the LPN's state license but also her license in any other state in which she was licensed to practice under the <u>Nurse Licensure Compact</u> in another compact state.

If the LPN desired to petition for reinstatement of her LPN license after three years, the reinstatement would occur only after an affirmative vote of three-fourths of the members of the board at a formal administrative hearing the board schedules.

If such a hearing occurs, the LPN would be required to demonstrate that she is "safe and competent to return to the practice of practical nursing."

The LPN is responsible for any fees required in this order.

The discipline of the LPN is a public record and is available to the public for review and copying.

Should the LPN want to contest the decision of the board, she may do so within 30 days by filing an appeal (an administrative review) and notifying the board.

## What This Decision Suggests for Your LPN Practice

The LPN's conduct in this case was appalling, to say the least. Although you might never conduct yourself in the same way, as an LPN remember that any behavior that causes a patient to be intimidated, scared, or otherwise threatened can be considered <u>unprofessional conduct</u> by your employer and ultimately by your board of nursing.

Also of interest in this case is the fact that three of the LPN's employees were witnesses surrounding her behavior.

When fellow nursing staff members witness, and can then support, your unprofessional conduct, the weight of their statements adds a great deal of credibility to a patient's reporting of your behavior.

Know that you cannot depend on fellow nursing staff covering for you. Not only may the staff be upset about your conduct, they are also concerned about keeping their jobs. Covering for you is seen as far too risky for their continued employment.

The LPN's conduct also resulted in the filing of criminal charges and a report to the state Adult Protection Services. It is not known if those charges resulted in a conviction, or what action the Adult Protection Services took, but if convicted and/or further disciplined, the LPN faces additional legal challenges.

It is certain that if she was criminally convicted and/or was sanctioned by the adult services, her future ability to regain her LPN license would be much more difficult.

If you find that you cannot maintain your LPN practice in accordance with your legal and ethical obligations when providing patient care, it is best to take time away from your practice.

You can use time earned, vacation time, or whatever other means are available to you to seek respite, recreation, and perhaps therapy, in order to regain your required professional approach to the patients for whom you provide care.

Doing so is not a sign of weakness. Rather, it is a sign of knowing yourself and knowing that your practice needs time for re-energizing itself so you can provide patient care with caring, grace, and respect.

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