

# Covenant School of Nursing

## Disciplinary Action Summary Assignment

### Instructional Module 2

Student Name: Jessica K Cortinas

Date: March 28, 2023

DAS Assignment # 2

Name of the defendant: William Cantrell

License number of the defendant: 861888

Date action was taken against the license: September 12, 2017

Type of action taken against the license: Revoked

*Use the space below to describe the events which led to the action(s) taken against the license. If multiple charges were in play, be sure and cite them, e.g. drug diversion, HIPAA violation, abandonment, forfeiture on student loans, etc.*

Beginning around January 2, 2015 through the filing of this document, the nurse was found to possibly lacking fitness to practice professional nursing. Mr. Cantrell was diagnosed with a mental health disorder and a substance use disorder. It was decided the two conditions of Mr. Cantrell could affect his ability to recognize signs and symptoms or changes in patients' conditions and could affect his ability to make necessary rational assessments regarding patient care. Due to the extent of his condition it was decided patients in his care could be in potentiate danger. In mid-March, 2015, while Mr. Cantrell participated in TPAPN, he was asked to take a urine drug screen. His screening showed positive use of Codeine and Morphine. Again, in October 2015 while participating in the TPAPN program for nurses, Mr. Cantrell provided another specimen for urine testing. He was found positive for oxazepam in the screening. Thirdly, February 2017, while the nurse participated in TPAPN, a drug screen showed positive for the use of amphetamine and methamphetamine. The three screenings and findings constitute the hinderance of ability of the nurse to provide safe care for the patients in his duty. Notice was given based on the formal charges noted, the adopted policies related to substance use disorders and other alcohol and drug related conduct, led to the revocation of Mr. Cantrell's licensure filed July 5, 2017.

*Use the space below to provide a description of measures you think could have prevented any action being taken against the license and/or would have prevented harm to the patient, if harm occurred.*

No harm of specific patients is noted in the formal charges against Mr. Cantrell.

*Identify which universal competencies were violated and explain how.*

Safety of patient and self is in violation by the actions of Mr. Cantrell. It is noted that the drugs found in his screenings would impair the nurse's ability to recognize subtle to make rational, accurate, and appropriate assessments, judgements, and decisions regarding patient care, thereby placing a patient in potential danger. His ability to communicate effectively with the patient is hindered by the affects of the drugs he was using lacking the ability to teach and appropriately interact regarding patient needs and treatment for quality outcomes. Mr. Cantrell hindered his ability to critically think regarding the needs of his patients. He failed

himself the ability to effectively have a caring relationship with the patients under his care giving value to their treatment, respect for their need for his care, and inability to be a sound advocate for their needs/preferences and overall well-being. Mr. Cantrell displayed a practice of unprofessional behavior with continued use of these drugs while participating in TPAPN. Despite the efforts to help the nurse correct his activity/determents, the nurse continued to demonstrate behaviors not consistent with standard universal competencies required of his licensure.

*Use the space below to describe what action you think a prudent nurse would take as the first to person to discover the event described, in other words, you are the one who discovers the patient has been harmed by the nurse or you have discovered the impairment or criminal activity cited in the disciplinary action.*

As the prudent nurse, if I were to have encountered Mr. Cantrell in the peak of his behavior or inaction, I would speak to the charge nurse regarding concerns of his inability to stay on task for the patient. I would ask him about any inconsistency or signs of impairment/consciousness on his part regarding the mental presence of the work. I would continue to communicate with him and the charge nurse on staff to determine how the patient safety can stay a priority when Mr. Cantrell's disregard for himself in his action is apparent.