

**PERMANENT VOLUNTARY SURRENDER
CONSTANCE MOORE-ARTHUR
R233547**

Gary N. Hicks, MS, RN, CEN, CNE
President
Maryland Board of Nursing
4140 Patterson Avenue
Baltimore, Maryland 21215-2254

**RE: Constance Moore-Arthur R233547
Permanent Voluntary Surrender of Registered Nurse License**

Dear Mr. Hicks,

I agree to permanently voluntarily surrender my license to practice as a Registered Nurse ("RN") in the State of Maryland, License Number **R233547**. I understand that, as of the effective date of this Permanent Voluntary Surrender, I may not practice as an RN, with or without compensation, as defined in the Maryland Nurse Practice Act ("the Act"), Md. Code Ann., Health Occupations Article ("Health Occ.") §§ 8-101 *et seq.* (2021 Repl. Vol.) and the Board's regulations, Code of Maryland Regulations ("COMAR") 10.27.01 *et seq.* I understand that, as of the effective date of this Permanent Voluntary Surrender, I am in the same position as an unlicensed individual.

I understand that this Permanent Voluntary Surrender shall become a **PUBLIC RECORD** and shall become effective on the date of the Board's acceptance of the Permanent Voluntary Surrender. I understand and agree that this Permanent Voluntary Surrender may be released or published by the Board as a final decision and order under the Public Information Act, Md. Code Ann., Gen. Prov. §§ 4-101 *et seq.* (2019 Repl. Vol.). I expressly consent to the publication of this Permanent Voluntary Surrender, including any and all information that may be protected from disclosure under federal and state law.

On or about May 3, 2018, I submitted an online Maryland Initial Application for licensure of RN by Exam ("RN Application") to the Board and indicated that I received my nursing education from -----. I affirmed and agreed to the following statement "I affirm that the contents of this document are accurate to the best of my knowledge."

When I registered for and sat for the NCLEX-RN exam, I indicated that my nursing education program was -----.

In an affidavit signed on June 7, 2022, Johanah Napoleon, the owner and operator of Palm Beach School of Nursing and Med-Life Institute – West Palm Beach, identified me by name, SSN and DOB as one of the individuals who did not complete the required program hours and clinical training necessary to obtain a transcript or a nursing associate in science degree and transcript from either Med-Life – West Palm Beach or Palm Beach School of Nursing.

On March 9, 2023, the Board issued an Order for Summary Suspension of Registered Nurse License "Order for Summary Suspension" which ordered the immediate suspension of my RN license.

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On or about March 29, 2023, the Board issued a Notice of Agency Action – Charges Under the Nurse Practice Act (“Charges”) charging my RN license with violations under Health Occ. §8-316(a): (30) Violates regulations adopted by the Board or an order of the Board;” *to wit* COMAR 10.27.01.05 A. (1) “An applicant for the nurse licensure examination shall: complete satisfactorily and meet all requirements for a diploma or degree from a registered nursing education program approved by the Board; or (2) have a diploma or degree from a registered nursing education program in another state, territory, or country determined by the Board to be substantially equivalent¹ to the registered nursing education program approved in this State at the time of the applicant’s graduation.”²

In lieu of proceeding to an evidentiary hearing on the Order for Summary Suspension and Charges, I agree to surrender my RN license. I agree that the Board has enough evidence to prove by a preponderance of the evidence the Investigative Findings in the Order for Summary Suspension issued on March 9, 2023 and the above cited violation in the Charges issued on March 29, 2023, and may sanction my RN license accordingly, pursuant to Health Occ. §8-316 and COMAR 10.27.26

I understand that, by executing this Permanent Voluntary Surrender, I am waiving the right, now and in the future, to any evidentiary hearing at which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to contest the facts summarized in this Permanent Voluntary Surrender, and at which I would have the right to all other substantive and procedural protections provided by law, including the right to appeal.

In executing this agreement to permanently surrender my RN license, I agree that I will never be eligible for reinstatement of my RN license, license number **R233547**, in the State of Maryland. I agree and understand that if I ever decide to re-apply for licensure as a RN in Maryland, I will approach the Board in the same posture as an unlicensed individual applying for initial RN licensure. I understand that it will be my burden, as an applicant for licensure, to demonstrate that I meet all the Board’s requirements for issuance of an initial license, that exists at the time I apply and that I am fit for RN licensure in Maryland.

¹ COMAR 10.27.01.01 C. provides: “Substantially equivalent” means a registered nursing or licensed practical nursing education program that:

- (1) Contains theoretical learning experiences and related clinical learning experiences that include direct patient care within various settings consistent with program objectives, outcomes, or competencies conducted either concurrently with or after the theoretical learning experience; and
- (2) Meets the curriculum requirement for Maryland schools of nursing at the time of the applicant’s graduation, including, but not limited to:
 - (c) Didactic and clinical instruction in nursing care of families and clients throughout the life span in a variety of care settings requiring nursing measures appropriate for: ...
 - (d) Didactic and clinical instructional content that includes, but is not limited to, the areas of:
 - (i) Medical and surgical nursing;
 - (ii) Maternal and child health;
 - (iii) Psychiatric nursing; and
 - (iv) Geriatric nursing;

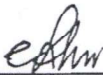
² In its discretion, the Board dismissed the other charges cited in the March 29, 2023 Charges.

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I agree and understand that, in considering whether to grant any future application for licensure, the Board may review my entire Board file, including any information that the Board receives after execution of this document, and may require me to undergo medical, psychological, and/or psychiatric evaluations and drug and alcohol testing to determine my fitness to receive a license. I understand that the Board is not required to grant me a new RN license.

I acknowledge that I may not rescind this Permanent Voluntary Surrender in part or in its entirety for any reason whatsoever. I fully understand the nature and effect of both the Board's actions and this Permanent Voluntary Surrender. Finally, I wish to make it clear that I had an opportunity to discuss this matter with legal counsel and that I willingly, knowingly, and voluntarily sign this Permanent Voluntary Surrender.

Sincerely,



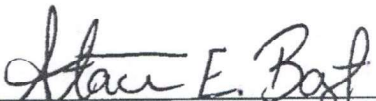
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NOTARIZATION

STATE OF Maryland
COUNTY OF Prince George's

I HEREBY CERTIFY that on this 16th day of June, 2023, before me, a Notary Public of the State of Maryland of the County aforesaid, personally appeared **CONSTANCE MOORE-ARTHUR** and declared and affirmed under penalties of perjury that signing the foregoing Permanent Voluntary Surrender was the voluntary act and deed of **CONSTANCE MOORE-ARTHUR**.

SEAL



Notary Public

My commission expires: June 20th, 2023.



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ACCEPTANCE

ON BEHALF OF THE MARYLAND BOARD OF NURSING, on this 28 day of JUNE, 2023, **CONSTANCE MOORE-ARTHUR'S PERMANENT VOLUNTARY SURRENDER** of her RN license, license number **R233547**, in the State of Maryland, is hereby accepted.

Gary N. Hicks, MS, RN, CEN, CNE
The Board President's Signature
Appears on the Original Document

Maryland Board of Nursing