

**STATE OF NEW HAMPSHIRE  
OFFICE OF PROFESSIONAL  
LICENSURE AND CERTIFICATION**

**BOARD OF NURSING**

**In Re: Sheila Hubbard  
RN Lic. # 073290-21**

**ORDER OF EMERGENCY  
SUSPENSION – 02/22/2024**

Docket No.: 2024-NUR-006

**I. CASE SUMMARY/PROCEDURAL HISTORY:**

On 02/21/2024, the Office of Professional Licensure and Certification, Division of Enforcement (“OPLC Enforcement”) filed a “Verified Petition for Emergency Temporary Suspension of Licensure Pursuant to RSA 310:12, IV and N.H. Code Admin. R. Title Plc 206.07” (“Petition”) pertaining to Sheila Hubbard, Registered Nurse (“Licensee”). On 02/22/2024, the Board reviewed the Petition at its regularly scheduled meeting and voted to immediately suspend Licensee’s license on an emergency basis pursuant to RSA 310:12, IV and N.H. Code Admin. R., Title Plc 206.07 (“Plc”) (“Rules”). This Order of Emergency Suspension follows.

**II. LEGAL STANDARD:**

“In cases involving imminent danger to public health, safety, or welfare, a board may order immediate suspension of a license or certification pending an adjudicative proceeding before the board to determine if the suspension should remain in place pending final adjudication of the matter.” RSA 310:12, IV. The Office of Professional Licensure and Certification has further interpreted that to mean that the Board “...

shall issue an order that immediately suspends the respondent’s license based on: (1) [a] determination that there is a reasonable basis to believe that public health, safety, or welfare requires emergency action...” Rule 206.07(a)(1).

**III. EVIDENCE PRESENTED AND FINDINGS OF FACT:**

**A. Evidence Presented**

The Board was presented with and/or considered the following evidence: the 02/21/2024 Verified Petition for Emergency Temporary Suspension of Licensure Pursuant to RSA 310:12, IV and N.H. Code Admin. R. Title Plc 206.07 pertaining to the Licensee which was filed by Michael Porter, OPLC Investigations Bureau Chief, OPLC Enforcement. A review of the evidence presented, and the reasonable inferences taken there from, allows the Board to find the following facts.

**B. Findings of Fact**

The Board hereby makes the following findings of fact. The Board hereby adopts and incorporates by reference herein, and attached hereto, the Verified Petition for Emergency Suspension filed by Michael Porter, OPLC Investigations Bureau Chief, OPLC Enforcement.

**CONCLUSIONS OF LAW:**

The Board concludes there is a reasonable basis to suspend the Licensee’s New Hampshire license on an emergency basis pursuant to RSA 310:12, IV Rule 206.07. The central facts are straightforward — The Board’s Findings of Fact reflect that the Licensee was the senior nurse on duty at Brookdale Sprucewood on 01/16/2024 when she failed to administer CPR, or other lifesaving measures, to patient E.C. after responding to E.C.’s emergency alert and observing the resident to be unconscious and not breathing. The Licensee's conduct on its face therefore warrants immediate emergency suspension of her license pursuant

to RSA 310:12, IV and Rule 206.07, pending a follow-up emergency suspension hearing/disciplinary hearing.

**ORDER:**

Pursuant to RSA 310:12, IV and Rule 206.07 (a) the Board hereby orders the immediate emergency suspension of Sheila Hubbard's license as a RN, pending a follow up emergency hearing in this matter. A Notice of Emergency Hearing with an appropriate date/time shall follow forthwith.

DATED: 2/22/2024

\_\_\_\_\_/s/ Shane D. Goulet, Presiding Officer\_\_\_\_\_  
Shane D. Goulet, Hearings Examiner  
New Hampshire Office of  
Professional Licensure & Certification  
7 Eagle Square  
Concord, NH 03301

**STATE OF NEW HAMPSHIRE  
NEW HAMPSHIRE BOARD OF NURSING**

**In The Matter Of:**

**Sheila Hubbard  
Registered Nurse  
Lic. No. 073290-21  
Case No. 2024-NUR-Hubbard-0171**

**VERIFIED PETITION FOR EMERGENCY TEMPORARY SUSPENSION OF  
LICENSURE PURSUANT TO RSA 310: 12, IV AND N.H. CODE ADMIN. R. TITLE  
PLC 206.07**

NOW COMES, THE Office of Professional Licensure and Certification (“OPLC”), Division of Enforcement (“Division”), and hereby petitions the New Hampshire Board of Nursing (“Board”) to emergently suspend the license of Sheila Hubbard (“Respondent”), a Registered Nurse (“RN”) in the State of New Hampshire stating in support as follows:

**BACKGROUND**

1. This matter involves an 82-year-old resident, E.C., of Brookdale Spruce Wood (A senior living facility consisting of Assisted Living, a Memory Care Unit, and Independent Living) who, on 1/16/2024, suffered cardiac arrest and was refused all emergency intervention, including CPR, by ALL Nurse licensees, specifically, Nurse licensees, including the Respondent, refused to perform CPR or provide any emergency intervention to E.C. other than to call 9-1-1.
2. E.C. was wearing an emergency alert pendant given to her by the facility (Brookdale) which requires the resident to activate the pendant in the event of an emergency.
3. By all witness accounts, E.C.’s alert pendant was activated by E.C. thereby activating an emergency alert that rang to and alerted an LNA, Deborah Polselli, who was on duty on the assisted living side of the facility.

4. LNA Polselli, responded to the emergency alert activated by E.C. and when Polselli arrived at E.C.'s apartment, she used her pass key to enter the apartment.
5. LNA Polselli reports she found E.C. on the floor, face down, between E.C.'s bed and wall and was not responsive.
6. LNA Polselli attempted to arouse E.C. and when she was unable to do so she called out to the Respondent via walkie talkie requesting the Respondent respond to E.C.'s emergency.
7. The Respondent arrived followed by another RN, Deepa Chinnusamy, and the Respondent told Chinnusamy to call 9-1-1.
8. Chinnusamy called 9-1-1 and when asked by the 9-1-1 operator whether CPR was in progress, Chinnusamy and LNA Polselli said no, they were instructed that they aren't allowed to touch patients on the independent living side.
9. The 9-1-1 operator raised the issue of CPR a second time and both Chinnusamy and Polselli once again indicated no, CPR was not going to be performed.
10. It is important to note, E.C. did not have a DNR on file.
11. Based on a timeline put together by witnesses, including the Respondent, the emergency alert activated by E.C. was triggered between 0645 hours and 0700 hours. *See* audio/video recording of the Respondent interview and Polselli interview.
12. The first 9-1-1 call was made by RN Deepa Chinnusamy at 0750 hours. *See* E 9-1-1 recording.
13. Based on witness interviews, including that of Durham, NH Police Officer who was the first emergency responder to arrive on scene at approximately 0758 -0759 hours, nobody

was in E.C.'s bedroom performing CPR.

14. The Durham, NH Police Officer was the first emergency responder to arrive on scene at approximately 0758 – 0759 hours.
15. The Police Officer rushed into the room, saw no nurses in the bedroom, found E.C. laying on her side, rolled E.C. to her back and, immediately began administering CPR.
16. Additional First Responders were right behind the police officer and upon arrival of additional First Responders, including EMT's, lifesaving measures were continuously provided to E.C. while on scene.
17. First Responder EMS notes reflect that on-scene, First Responders were able to regain Return of Spontaneous Circulation ("ROSC") and a BP of 102/62 after emergency intervention, however, enroute to the hospital, E.C.'s pulse was lost. First Responders continued lifesaving measures and noted E.C. has Pulseless Electrical Activity ("PEA"). As First Responders arrived at the hospital, they were once again able to obtain ROSC and received a pulse. The ED Doctor confirmed placement of a King Airway.
18. At 0842 hours, First Responders were able to begin transporting E.C. to Wentworth Douglas Hospital via ambulance where they continued lifesaving measures enroute.
19. According to family members, E.C. was placed on life support until family could arrive at the hospital. Upon arrival of family members at the hospital, the family decided, after a medical consult, to remove E.C. from life support sometime after 11 AM.
20. According to family members, E.C.'s death pronouncement is listed as 1555 hours on 1/16/2024.

**SHEILA HUBBARD, RN (RESPONDENT)**

21. The Board of Nursing first granted Sheila Hubbard (“RN”) a license to practice as a Registered Nurse on 3/4/2016.
22. The Respondent’s last renewal was 10/13/2022 with an expiration date of 10/27/2024.
23. On 1/16/2024 the Respondent was the senior nurse on duty assigned to the assisted living section.
24. At all times while on duty at Brookdale, the Respondent owes a duty of care to all patients/residents as outlined in RSA Chapter 326-B and Administrative Rules governing the practice of Nursing. *See* also Brookdale Senior Living Independent Care CPR Policy.
25. On 1/16/2024, the Respondent, owed a duty of care to E.C.
26. E.C. was provided an emergency alert pendant by Brookdale which E.C. activated on the morning of 1/16/2024 alerting internal staff she had an emergency.
27. The Respondent was notified of the emergency and responded to the emergency alert.
28. Upon finding E.C. not breathing and not conscious, the Respondent failed to administer any lifesaving measures, including but not limited to CPR.
29. On 2/8/2024 Division Investigators interviewed the Respondent in the presence of her Attorney and during that interview, based on other witness interviews and records obtained by the Division, the Respondent provided less than truthful information including but not limited to the concealment of the identify of another Nurse Trainee present in E.C.’s room during the emergency response.

**INVESTIGATION**

30. Division Investigators have conducted numerous witness interviews, including the Respondent, other Nurse Licensees, the Executive Director for Brookdale, and first responders.

31. The Division Investigation is active and ongoing.

**RSA 310: 12, IV<sup>1</sup>**

32. RSA 310: 12, IV, authorizes the emergency suspension of a professional license in cases involving imminent danger to the public health, safety, or welfare.

33. The Respondent is a RN and has been licensed as such since 2016.

34. On 1/16/2024, LNA Polselli was working under the supervision and guidance of the Respondent.

35. On 1/16/2024, the Respondent was employed by Brookdale Spruce Wood as a Registered Nurse, owing a duty of care to residents of the facility, including E.C., and other residents in the Independent Care portion of the facility when a resident goes into cardiac and/or pulmonary arrest *See* Brookdale Senior Living Policy, CPR, Applicable to Independent Living, effective 3/2016 and last revised 3/2022. *See* also RSA 326-B: 12, I and II.<sup>2</sup>

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<sup>1</sup> IV. In cases involving imminent danger to public health, safety, or welfare, a board may order immediate suspension of a license or certification pending an adjudicative proceeding before the board to determine if the suspension should remain in place pending final adjudication of the matter, and which shall commence not later than 10 working days after the date of the order suspending the license unless the licensee or certified individual agrees in writing to a longer period. In such cases of immediate danger, the board shall comply with RSA 541-A:30.

<sup>2</sup> RSA 326-B: 12, I

(e) Providing for the maintenance of safe and effective nursing care rendered directly or indirectly.

(f) Promoting a safe and therapeutic environment.

(h) Advocating for clients, families, groups, and communities by attaining and maintaining what is in the best interest of the client or group.

II. Each RN is accountable to clients, the nursing profession, and the board for complying with the requirements of this act and the quality of nursing care rendered, and for recognizing limits of knowledge and experience and planning for management of situations beyond the nurse's experience.



36. 1/16/2024 the Respondent's refusal and failure to perform CPR on independent living resident E.C., upon finding E.C. not conscious and not breathing, when the Respondent responded to an emergency alert activated by E.C. herself, calling for emergency assistance, in this case CPR due to E.C. being in cardiac arrest, demonstrates the Respondent owed E.C. a duty of care, which the Respondent refused and failed to deliver in violation of the Respondent's licensure obligations pursuant to RSA 326-B: 12, I (e), (f), (h), and II, deems the Respondent is an imminent danger to the public health, safety, or welfare requiring an emergency suspension of licensure.

37. The Respondent's refusal and failure to perform CPR consistent with the policies and procedures in place for Independent Living Residents at Brookdale requiring "*An associate certified in cardiopulmonary resuscitation (CPR) will perform CPR*" if a Resident is in cardiac and/or pulmonary arrest, is not only a violation of Brookdale policy, but is a serious violation of RSA 326-B: 12, I, (e),(f), (h) and II and is also a serious violation of RSA 326-B: 37, II (e),(g),(h)(1)(2)(3), (k), (l), (m)<sup>3</sup> placing E.C., a

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<sup>3</sup> RSA 326-B: 37, II The board may discipline a licensee or applicant for any one or a combination of the following grounds:

(e) Unethical conduct including but not limited to conduct likely to deceive, defraud, or harm the public or demonstrating a willful or careless disregard for the health or safety of a client. Actual injury need not be established.

(g) Conduct including but not limited to failure or inability to perform nursing or nursing assistant practice as defined in this chapter, with reasonable skill and safety.

(h) Unprofessional conduct including but not limited to:

(1) A departure from or failure to conform to nursing standards, including improper management of client records.

(2) Delegating or accepting the delegation of a nursing function or a prescribed health function when the delegation or acceptance could reasonably be expected to result in unsafe or ineffective client care.

(3) Failure to supervise the performance of acts by any individual working at the nurse's delegation or assignment.

(k) Any nursing practice that may create unnecessary danger to a client's life, health, or safety. Actual injury to a client need not be established.

(l) Inability to practice safely, including demonstration of actual or potential inability to practice nursing with reasonable skill and safety to clients by reason of illness or as a result of any mental or physical condition.

(m) Actions or conduct that include, but are not limited to, falsifying reports, client documentation, agency

member of the public, in imminent danger, thereby deeming the Respondent an imminent danger to the public health safety, or welfare, requiring an emergency suspension of licensure.

38. The Respondent's failure to perform and/or engage in lifesaving measures, including CPR on E.C., in an emergency situation, cardiac arrest, while E.C. is on the ground, in her bedroom, not conscious and not breathing, demonstrates the Respondent failed to exercise or perform her nursing duties with reasonable skill or safety, deeming the Respondent an imminent danger to the public health, safety, or welfare, requiring immediate, emergent suspension of her license.
39. The Respondent continues in her current licensure status at the same facility providing care to residents who are similarly situated to E.C.
40. The Respondent's failure to provide truthful, accurate information during her interview with Division Investigators, including concealment of information critical to the investigation, including but not limited to identifying ALL personnel in E.C.'s room on 1/16/2024 and providing a less than truthful narrative as to what efforts she made, or failed to make, including emergent lifesaving intervention to E.C., demonstrates the Respondent is an ongoing imminent danger to the public health, safety, or welfare, warranting an emergency suspension of licensure.

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records, or other essential health documents, failure to cooperate with a lawful investigation conducted by the board, failure to maintain professional boundaries with clients or family members, use of excessive force upon or mistreatment or abuse of any client, engaging in sexual conduct with a client, touching a client in a sexual manner, requesting or offering sexual favors or language or behaviors suggestive of same, or threatening or violent behavior in the workplace.

**WHEREFORE**, Michael Porter, Esq., Investigations Bureau Chief, OPLC-Division of Enforcement, on behalf of the Division, prays:

- A. The Board make a finding the Respondent is an imminent danger to the public health, safety, or welfare and emergently suspend the Respondent's license to practice consistent RSA 310: 12, IV and Plc 206.07.
- B. The Board schedule an emergency hearing within 10 days consistent with RSA 310:12, IV.
- C. Grant further relief as justice requires.

I, Michael Porter, Investigations Bureau Chief, OPLC-Division of Enforcement, relying on confirmation of information from APRN Investigator Jessica Reeves, Inv. Michelle Sousa, and Inv. Brendon White, attest and affirm the facts outlined in this *Verified* Petition for Emergency Suspension of Licensure pursuant to RSA 310:12, IV and Plc 206.07 are true and accurate to the best of my knowledge and belief.

Date: February 21, 2024

Respectfully Submitted,

*/s/ Michael Porter*

Michael Porter, Esq.

NH BAR 266285

Investigations Bureau Chief

OPLC-Division of Enforcement