



# THE CORRECTIONAL NURSE

Inspiring

## Professional Correctional Nursing Practice

April 2025

Last month at the OPEN FORUM we discussed nurses who are criminally charged due to their actions or inactions during patient care. In preparation for the discussion, I went online and did a search for correctional nurse criminally charged, and more than 10 cases were cited. Some are still ongoing, and others have been decided. Some were the result of the nurse engaging in sexual misconduct, and he/she/they were charged with (institutional) sexual assault. In one sexual assault case the nurse was sentenced by a jury to 30 years in prison (multiple victims). Other actions that resulted in criminal charges included a matter where the medical examiner determined the death was a homicide when he found that the cause of death was malnutrition and dehydration. That patient was allegedly restrained to a restraint bed for 3 days with no intervention by medical staff and was noted to have lost 50 lbs in 2 weeks. Nurses allegedly did not check on him until he was found deceased. Four correctional nurses are charged with involuntary manslaughter which is a 15-year felony in that state.

In another case the custody officers and nurse noted a patient was non-responsive, but did not enter the cell to evaluate the patient until hours later. Another nurse witnessed a patient receive a severe beating by custody officers but did not intervene. In another matter, the nurse decided to keep the patient at the facility without contacting a provider after a fall from the bunk and a use of force by officers. While the officers were not charged, the nurse was charged with involuntary manslaughter. In another situation, the nurse informed the officers that the patient, who was suffering from worsening paralysis due to a neurological disorder, was a "frequent flyer" and nothing was wrong with him. She was charged with 2nd degree manslaughter and criminal neglect.

In another case the nurse was charged with involuntary manslaughter when the facility videos showed that she never went near the patient's cell even though she documented in great detail that she did have an encounter with the patient, and he refused care and medication. She ultimately was found guilty of a lesser charge - falsifying a health record - and is serving 12 months incarceration.

So, why am I bringing this topic up here? I am doing so to hopefully raise awareness. While it is very true that the threat of criminal accusation can occur in any nursing specialty, correctional nurses work in an environment where healthcare is not the primary mission, and we must be ever mindful that we are, in most cases, the person who decides whether the patient goes to the emergency department for diagnosis, care and treatment; gets a consult from a provider; or is healthy enough to stay in the facility and be treated per Nursing Protocols. We must remember that our patients cannot just choose to go to the Urgent care or emergency department, as they would in the community, and so our responsibility to be a patient advocate and ensure they are appropriately evaluated and treated is high. At the same time, we must always practice within our scope.

### Newsworthy Notes

The next American Correctional Nurses Association OPEN FORUM will be held in April 2025. Check the ACNA Website for the topic of the month. We have been having some very interesting conversations, and I invite you to become a member of ACNA and attend our Open Forum. Check out the [website!](#)

### Upcoming conferences

- [NCCHC](#) Spring Conference April 5 - 8, 2025 in Louisville, KY
- [American Jail Association](#) May 17-21, 2025 in Fort Worth, TX
- [American Correctional Association](#) 155th Congress in Denver, Colorado, August 21-26, 2025.

## CorrectionalNurse.Net

This month at [CorrectionalNurse.Net](#) we will be discussing the clinical topic of headache and professional topics like the new Nursing Code of Ethics from the ANA.

As always, announcements for new blog posts will be posted on our FaceBook pages and on Instagram.

Please [FOLLOW US](#) and check back often to ensure that you get notification of new posts!

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## Correctional Nurse Educator

I am finalizing the 2025 Nurses' Week Bundle that will be released May 6-12, 2025, so if there are any courses you'd like to see included, please sent me an email to let me know. As you remember, this Bundle is typically 18 or more continuing education hours, enough to satisfy the requirements for the NCCHC certifications and the ACA certifications, for a greatly reduced cost of \$75.00!

Our 50% off featured class this month at [The Correctional Nurse Educator](#) is *Documentation for the Correctional Nurse*. I hope you enjoy it!

Remember The Correctional Nurse Educator will work with your group to provide quality, accredited continuing education classes at a discounted and affordable cost that are specifically for Correctional Nurses.

VISIT THE CORRECTIONAL NURSE EDUCATOR NOW

## Nursing Behind the Wall

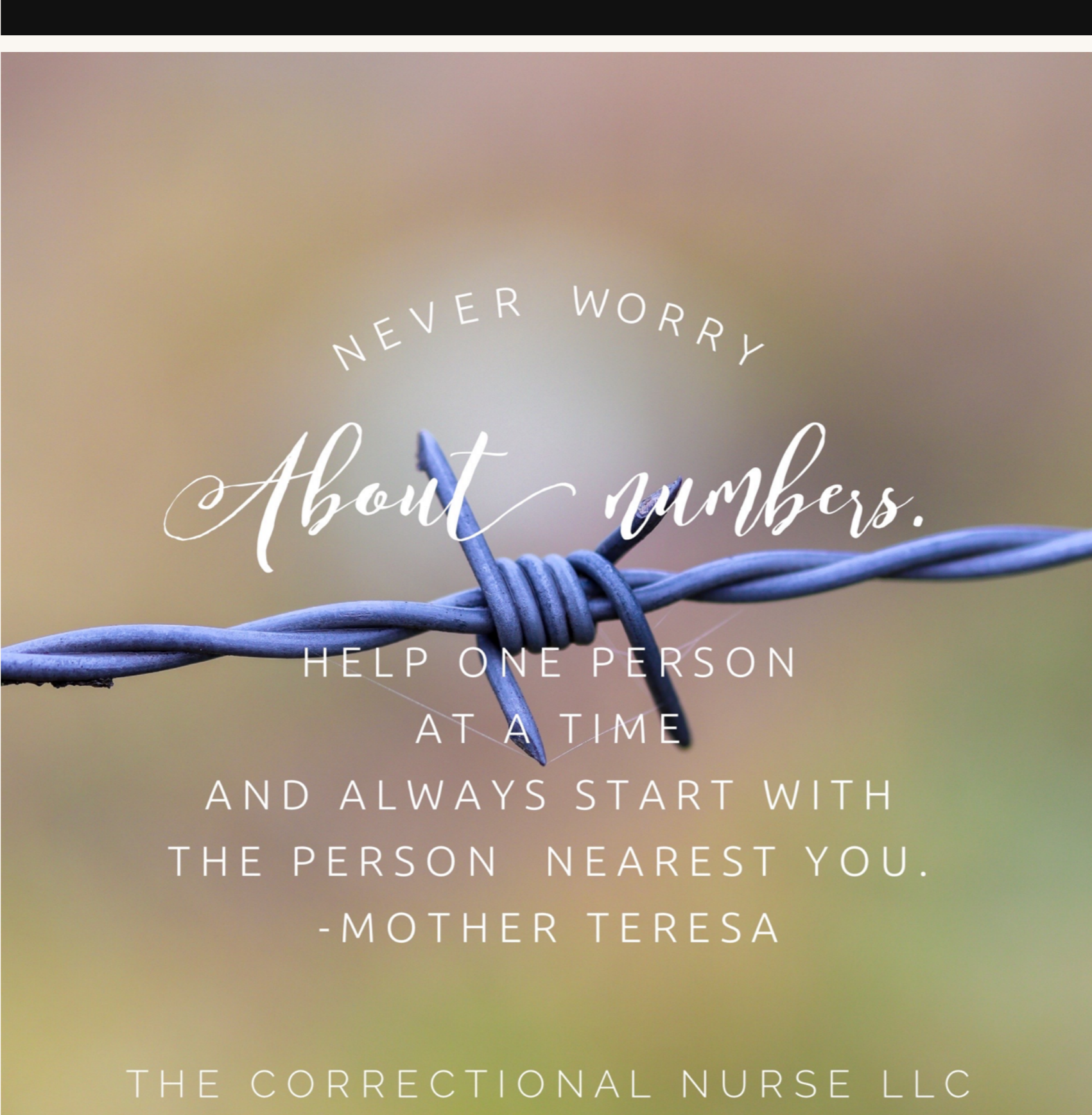
This month at [Nursing Behind the Wall](#) you will meet Ms. Burns, a patient with an eye complaint.

VISIT NURSING BEHIND THE WALL NOW

In closing, I appreciate you taking the time to read this newsletter, and I hope that you will find our sites interesting and educational. Our profession of Correctional Nursing is unique and sometimes challenging, but always very important to our patients. The impact we make is far-reaching, even if it is not always evident as we care for our patients. I have ALWAYS been proud to say that I am a Correctional Nurse – I hope that you are as well!

Lori

## Inspiration



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