

**STATE OF VERMONT
SECRETARY OF STATE
OFFICE OF PROFESSIONAL REGULATION
BOARD OF NURSING**

IN RE:)
KIMBERLY S. RUEL) **Docket No. 2023-28**
License No. 026.0103835)

STIPULATION AND CONSENT ORDER

STIPULATION

NOW COME the State of Vermont, by and through State Prosecuting Attorney Rachel Heath, and Respondent Kimberly Ruel, by and through Attorney Edward Adrian, who hereby Stipulate and Agree as follows:

Board Authority

1. The Vermont State Board of Nursing (the "Board") has authority to issue warnings or reprimands; suspend, revoke, limit, or condition current licenses; or prevent the renewal of lapsed licenses if, after disciplinary hearing, the Board finds that the Respondent has engaged in unprofessional conduct. 3 V.S.A. §129; 3 V.S.A. §129a; 3 V.S.A. §814(d); 26 V.S.A. Chapter 28; the Administrative Rules of the Board of Nursing (the "ARBN"); and the Rules of the Office of Professional Regulation ("OPR").

Alleged Facts

2. Kimberly Ruel ("Respondent") of Essex Junction, Vermont is licensed as a Registered Nurse ("RN") under license number 026.0103835. The State of Vermont first issued this license on June 24, 2014, and the license expires on March 31, 2023.
3. From October 7, 2019 until she was terminated on July 1, 2020, Respondent worked as an RN at Northwestern Medical Center (the "Facility").
4. At the beginning of her employment, Respondent's 90-day Evaluation noted concerns over communication, ability to adapt to changes, displaying patience, charting issues such as noting normal urinary function when patient was admitted for kidney stones, and failing to use critical thinking skills to prioritize patients.
5. As such, a 60-day extension was required of her to demonstrate improvement and growth.

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6. On June 14, 2020, when Respondent was asked to assist LNA S.M., Respondent said, "what the fuck, are you kidding me, I went to nursing school so I wouldn't have to wipe ass."
7. On June 15, 2020 her supervisor had to coach Respondent on customer service and patient safety, including failing to assist a patient to use the restroom and complaining to the patient about her school loans.
8. On June 23, 2020, Respondent answered a phone call from a family inquiring about the status of a loved one. Without obtaining any information and without placing the family on hold, Respondent asked Dr. V.S. to take the call.
9. When Dr. V.S. asked Respondent to obtain information, Respondent answered, "No she is on the phone now and very angry. She's driving me crazy."
10. The family was able to hear what Respondent said.
11. On June 23, 2020, Respondent made the decision to withhold a blood pressure medication without consulting with the treating provider, Dr. V.S.
12. Respondent did, however, contact Dr. V.S. four times asking about giving the patient Tylenol.
13. Once Dr. V.S. reviewed the record, he felt Respondent's behavior was highly inappropriate; she had had ample opportunity to discuss the blood pressure medication during the four other conversations she had about Tylenol, and had she asked him, he would have informed her to provide the blood pressure medication.
14. On June 27, 2020, Respondent spoke to RN M.G. in front of a patient about how the patient was crazy and that she was the only person who could get the patient to take her Ativan.
15. In the medical records, Respondent is not listed as a nurse who administered Ativan to the patient.
16. On June 27 and 28, 2020, according to RN M.G., Respondent encouraged a patient to not use her CPAP so that Respondent would not have to utilize modified droplet precautions to enter the room. Respondent bragged to other nurses about having the patient not wear her CPAP so that she could get out of wearing her gear.
17. Respondent also failed to take vital signs prior to medication administration for this patient stating that "no medications required them."
18. On June 28, 2020, RN M.G. reported that Respondent helped a 2-person assist patient to the commode without assistance from another nurse. Respondent also left the bedside commode full and left the patient dirty.

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19. On June 29, 2020, according to RN K.C., Respondent admitted a patient with foot-wounds without taking pictures.
20. On June 29, 2020, RN M.G. noted that Respondent over sedated a patient who was supposed to have a surgery. She bragged to other nurses that she had given the patient all the "sleepy, sleepy" medications so he would not be an issue.
21. When surgery time came, the staff could not find any consent forms for the patient. Respondent had sedated the patient so heavily he could not speak or move and could not sign new consent forms.
22. Respondent had also failed to create a chart for the patient.
23. The patient was so sedated that he did not receive any sedation for his surgery and was given only local.

Violation One: 3 V.S.A §129a(b)(1) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes: (1) performance of unsafe or unacceptable patient or client care.

24. Paragraphs 2 through 23 above are incorporated herein.
25. As an RN, Respondent must provide safe and acceptable patient care.
26. Paragraphs 2 through 23 above demonstrate that Respondent provided unsafe and unacceptable patient care by failing to use critical thinking skills, inappropriately communicating with patients and staff, making medication assessments for herself that the treating provider should have made, failing to follow protocols, and over sedating a patient.
27. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because Respondent has committed unprofessional conduct in violation of 3 V.S.A. §129a(b)(1).

Violation Two: 3 V.S.A. § 129a(b)(2) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes: (2) failure to conform to the essential standards of acceptable and prevailing practice.

28. Paragraphs 2 through 23 above are incorporated herein.
29. Under Vermont law, an RN must practice competently by conforming to the essential standards of acceptable and prevailing practice.

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30. As an RN, Respondent is subject to the standards of acceptable care and prevailing practice.
31. Paragraphs 2 through 23 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to use critical thinking skills, inappropriately communicating with patients and staff, making medication assessments for herself that the treating provider should have made, failing to follow protocols, and over sedating a patient.
32. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because Respondent committed unprofessional conduct in violation of 3 V.S.A. § 129a(b)(2).

Violation Three: 3 V.S.A. § 129a(a)(15) Failing to exercise independent professional judgment in the performance of licensed activities when that judgment is necessary to avoid action repugnant to the profession.

33. Paragraphs 2 through 23 above are incorporated herein.
34. Under Vermont law, an RN must exercise independent professional judgment in the performance of licensed activities when such judgment is necessary to avoid action repugnant to the profession.
35. Paragraphs 2 through 23 above demonstrate that Respondent failed to exercise independent professional judgment in the performance of licensed activities when such judgment is necessary to avoid action repugnant to the profession when she failed to use critical thinking skills, inappropriately communicated with patients and staff, made medication assessments for herself that the treating provider should have made, failed to follow protocols, and over sedated a patient.
36. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because Respondent committed unprofessional conduct in violation of 3 V.S.A. § 129a(a)(15).

Understandings

37. This Stipulation is neither an admission of facts by Respondent nor a concession by the State of Vermont that its charges are not well-founded. To avoid delay, uncertainty, inconvenience, and the expense of protracted litigation, the parties enter this full and final Stipulation pursuant to these Understandings and the Order below. Respondent does not contest that the State has evidence which, if believed by the fact finder, may establish by a preponderance of the evidence that she engaged in the alleged misconduct.
38. Respondent understands that the Nursing Board must review and accept the terms of the Consent Order. If the Board rejects any portion, the entire Stipulation and Consent Order shall be null and void.

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39. Respondent specifically waives any claims that any disclosures made to the full Board during its review of this agreement have prejudiced her rights to a fair and impartial hearing in future hearings if this agreement is not accepted by the Board.
40. Respondent has read and reviewed this entire document and agrees that it contains the entire agreement between the parties.
41. Respondent is not under the influence of any drugs or alcohol at the time she signs this Stipulation and Consent Order.
42. Respondent voluntarily enters into this agreement after the opportunity to consult with legal counsel and is not being coerced by anyone into signing this Stipulation and Consent Order.
43. Respondent voluntarily waives her right to a contested hearing before the Board of Nursing and waives any right to appeal from this Stipulation and Consent Order.
44. Respondent agrees that the Order set forth below may be entered by the Board.

ORDER

Based on the Stipulation above, it is **ORDERED AND ADJUDGED** as follows:

- A. The Board of Nursing hereby **REPRIMANDS** Respondent's license.
- B. The Board of Nursing hereby **CONDITIONS** Respondent's license commencing with the date of entry of this Stipulation and Consent Order. The conditions will be as follows:
 1. Re-issuance of License. Upon the commencement of these conditions, Respondent shall be issued a license labeled "conditioned."
 2. License Renewal. This Order does not automatically extend the license and Respondent must comply with the requirements for license renewal.
 3. Length of Time of Conditions Imposed. Respondent shall be subject to the conditions for a **minimum period of two years** in which Respondent works at least 80 hours every calendar month as a nurse and until Respondent has fully completed all conditions as ordered. Part time hours of fewer than 80 hours every calendar month shall be credited on a prorated basis. Respondent shall not work more than 40 hours per week.
 4. Monitoring. The Office of Professional Regulation, through the Enforcement Case Manager, shall be responsible for monitoring Respondent's compliance with these Conditions. All reports or correspondence regarding compliance with these

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conditions shall be submitted to the Case Manager in accordance with the Conditions listed below.

5. Practice Under Supervision. Respondent shall practice as a nurse only in a setting where Respondent is supervised for the entire shift by a licensed registered nurse that is in good standing with the Board. The level of supervision required is direct supervision. Direct supervision means the supervising nurse is present on the same unit as Respondent.
6. Reports from Employers/Program Director. Within one month of the date of reinstatement or within one month of the commencement of nursing employment and **monthly** thereafter, Respondent shall cause every nursing employer Respondent has worked for during the month to submit to the Board an evaluation of Respondent's work performance and attendance during that month. In the event Respondent is attending a nursing program, Respondent shall cause the Program Director to submit to the Board, on a monthly basis, a written evaluation of Respondent's performance and attendance. These reports shall be submitted in writing on forms from the Enforcement Case Manager. All employer reports shall indicate satisfactory performance (i.e., consistently meeting all standards of nursing practice) and attendance.
7. Types of Employment Prohibited. Respondent shall not work in a supervisory role. Respondent shall not work for a nurse registry, traveling nurse agency, float-pool, home health care agency, temporary nursing employment agency, or as a private duty nurse or personal care provider requiring a nursing or nursing assistant license during the effective period of this Consent Order.
8. Interview with the Board or its Designee. Respondent shall appear in person for interviews with the Board or its designee upon request.
9. Out-of-State Practice. Before any out-of-state practice can be credited toward fulfillment of these terms and conditions, Respondent shall first obtain approval from the Board or its designee. The Board will approve out-of-state nursing practice so long as Respondent can still comply with the provisions of this Consent Order. If Respondent receives discipline on a nursing license held in another state during the conditioned period, Respondent must inform the Board of such, in writing, within ten (10) days of receiving such discipline.
10. Notification to Employers/Nursing School. Respondent shall provide a copy of this Stipulation and Consent Order to all employers in any current or future setting in which Respondent practices as a nurse and inform them of Respondent's conditional license status. Within ten (10) days of the date of entry of this Consent Order or of any subsequent nursing employment, Respondent shall cause Respondent's immediate supervisor to submit to the Board an employer agreement form approved by the Board, acknowledging receipt of the Stipulation and Consent Order and the ability to comply with the conditions in the Consent Order.

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In the event Respondent is attending a nursing program that has a clinical portion that involves actual patient care, Respondent shall provide a copy of the Stipulation and Consent Order to the Program Director. Respondent shall cause the Program Director to submit to the Board a nursing program agreement form approved by the Board, acknowledging receipt of the Stipulation and Consent Order and the ability of the program to comply with the conditions in the Consent Order during clinical experience.

11. Notification of Place of Employment/Personal Address/Telephone Number. Within ten (10) days of the date of entry of this Consent Order, Respondent shall notify the Board, in writing, of Respondent's current place of employment, personal address, and telephone number. Respondent shall further notify the Board, in writing, within forty-eight (48) hours of any change in employment (including resignation or termination), personal address, or telephone number.
12. Notification to Other States. If Respondent is licensed in nursing in any other state(s), Respondent must inform the nursing licensing board of the state(s) in which Respondent is licensed of the conditional status of Respondent's Vermont nursing license within thirty (30) days of the date of entry of this Order.
13. Required Coursework. Respondent shall, at her own expense and within ninety (90) days of the date of entry of this Stipulation and Consent Order, successfully complete (i.e., receive a passing score, if applicable) ten hours of pre-approved coursework on ethics, communication with co-workers and patients, and critical thinking. The coursework must be pre-approved by the Enforcement Case Manager.

Respondent shall submit the certificates of completion, completed assignment book(s) and quiz results, if applicable, to the Enforcement Case Manager. Failure to satisfactorily complete the courses within the prescribed timeframe shall constitute a violation of this Order. The coursework may not be counted toward any continuing education requirement of licensure.
14. Costs. Respondent shall bear all costs of complying with this Consent Order.
15. Violation of this Order. If Respondent violates this Order the Board, after giving Respondent notice and an opportunity to be heard, may rescind or modify this Order and impose additional appropriate disciplinary actions. If a complaint of unprofessional conduct is made against Respondent during the term of this Order, this Order shall be automatically extended until the unprofessional conduct matter is concluded.
16. Completion of Conditional License Period. Respondent shall submit a petition to the Docket Clerk to remove any and all conditions on Respondent's license. The State will assent to or oppose Respondent's petition. The Board will conduct a hearing if necessary. Respondent bears the burden and must present proof that

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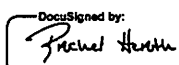
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Respondent has fully complied with the terms of this Order and these conditions are no longer necessary to protect the public.

- C. Respondent shall pay an **ADMINISTRATIVE PENALTY** OF \$300 within 90 days of entry of this Order.
- D. Notwithstanding any provision above, the Respondent must continue to meet all Nursing Board requirements for maintaining a license, license renewal and license reinstatement.
- E. This Stipulation and Consent Order is a matter of public record and may be reported to other licensing authorities as provided in 3 V.S.A. § 129(a).
- F. This Stipulation and Consent Order will remain part of Respondent's licensing file and may be used for purposes of determining sanctions in any future disciplinary matter.

AGREED TO:

Dated: 1/16/2024

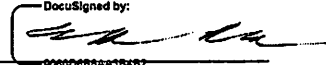
STATE OF VERMONT
SECRETARY OF STATE
By: 
Rachel Heath
Prosecuting Attorney

Dated: 1/16/2024

RESPONDENT
By: 
Kimberly Ruel

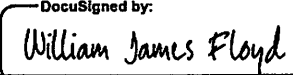
APPROVED AS TO FORM:

Dated: 1/16/2024

ATTORNEY FOR RESPONDENT
By: 
Edward Adrian, Esq.

APPROVED AND SO ORDERED:

Dated: 2/13/24
Date of Entry: 2/14/24

VERMONT BOARD OF NURSING
By: 
Chairperson

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**STATE OF VERMONT
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BOARD OF NURSING**

IN RE:)
KIMBERLY S. RUEL) **Docket No. 2023-**
License No. 026.0103835)

SPECIFICATION OF CHARGES

NOW COMES the State of Vermont and makes the following charges against Registered Nurse Kimberly Ruel:

Board Authority

1. The Board has authority to issue warnings or reprimands; suspend, revoke, limit, or condition current licenses; or prevent the renewal of lapsed licenses if, after disciplinary hearing, the Board finds that the Respondent has engaged in unprofessional conduct. 3 V.S.A. § 129(a); 3 V.S.A. § 129a; 3 V.S.A. § 814(d); 26 V.S.A. Chapter 28; the Administrative Rules of the Board of Nursing (the “ARBN”); and the Rules of the Office of Professional Regulation (“OPR Rules”).

Statement of Facts

2. Kimberly Ruel (“Respondent”) of Essex Junction, Vermont is licensed as a Registered Nurse (“RN”) under license number 026.0103835. The State of Vermont first issued this license on June 24, 2014, and the license expires on March 31, 2023.
3. From October 7, 2019 until she was terminated on July 1, 2020, Respondent worked as an RN at Northwestern Medical Center (the “Facility”).
4. At the beginning of her employment, Respondent’s 90-day Evaluation noted concerns over communication, ability to adapt to changes, displaying patience, charting issues such as noting normal urinary function when patient was admitted for kidney stones, and failing to use critical thinking skills to prioritize patients.
5. As such, a 60-day extension was required of her to demonstrate improvement and growth.
6. On June 14, 2020, when Respondent was asked to fill in as an LNA because there was a shortage, Respondent swore at LNA S.M. who was trying to give her report.
7. Respondent said, “what the fuck, are you kidding me, I went to nursing school so I wouldn’t have to wipe ass.”

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8. Respondent further said, “why would I go to huddle to be told I’m going to be a stupid LNA for the night.”
9. On June 15, 2020 her supervisor had to coach Respondent on customer service and patient safety, including failing to assist a patient to use the restroom and complaining to the patient about her school loans.
10. On June 23, 2020, Respondent answered a phone call from a family inquiring about the status of a loved one. Without obtaining any information and without placing the family on hold, Respondent asked Dr. V.S. to take the call.
11. When Dr. V.S. asked Respondent to obtain information, Respondent answered, “No she is on the phone now and very angry. She’s driving me crazy.”
12. The family was able to hear what Respondent said.
13. On June 23, 2020, Respondent made the decision to withhold a blood pressure medication without consulting with the treating provider, Dr. V.S.
14. Respondent did, however, contact Dr. V.S. four times asking about giving the patient Tylenol.
15. Once Dr. V.S. reviewed the record, he felt Respondent’s behavior was highly inappropriate; she had had ample opportunity to discuss the blood pressure medication during the four other conversations she had about Tylenol, and had she asked him, he would have informed her to provide the blood pressure medication.
16. On June 27, 2020, Respondent spoke to RN M.G. in front of a patient about how the patient was crazy and that she was the only person who could get the patient to take her Ativan.
17. In the medical records, Respondent is not listed as a nurse who administered Ativan to the patient.
18. On June 27 and 28, 2020, according to RN M.G., Respondent encouraged a patient to not use her CPAP so that Respondent would not have to utilize modified droplet precautions to enter the room. Respondent bragged to other nurses about having the patient not wear her CPAP so that she could get out of wearing her gear.
19. Respondent also failed to take vital signs prior to medication administration for this patient stating that “no medications required them.”
20. On June 28, 2020, RN M.G. reported that Respondent helped a 2-person assist patient to the commode without assistance from another nurse. Respondent also left the bedside commode full and left the patient dirty.
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22. On June 29, 2020, RN M.G. noted that Respondent over sedated a patient who was supposed to have a surgery. She bragged to other nurses that she had given the patient all the “sleepy, sleepy” medications so he would not be an issue.
23. When surgery time came, the staff could not find any consent forms for the patient. Respondent had sedated the patient so heavily he could not speak or move and could not sign new consent forms.
24. Respondent had also failed to create a chart for the patient.
25. The patient was so sedated that he did not receive any sedation for his surgery and was given only local.

Violation One: 3 V.S.A §129a(b)(1) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes: (1) performance of unsafe or unacceptable patient or client care.

26. The State re-alleges and incorporates Paragraphs 2 through 25 above.
27. As an RN, Respondent must provide safe and acceptable patient care.
28. Paragraphs 2 through 25 above demonstrate that Respondent provided unsafe and unacceptable patient care by failing to use critical thinking skills, inappropriately communicating with patients and staff, making medication assessments for herself that the treating provider should have made, failing to follow protocols, and over sedating a patient.
29. The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because Respondent has committed unprofessional conduct in violation of 3 V.S.A. §129a(b)(1).

Violation Two: 3 V.S.A. § 129a(b)(2) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes: (2) failure to conform to the essential standards of acceptable and prevailing practice.

30. The State re-alleges and incorporates Paragraphs 2 through 25 above.
31. Under Vermont law, an RN must practice competently by conforming to the essential standards of acceptable and prevailing practice.
32. As an RN, Respondent is subject to the standards of acceptable care and prevailing practice.

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33. Paragraphs 2 through 25 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to use critical thinking skills, inappropriately communicating with patients and staff, making medication assessments for herself that the treating provider should have made, failing to follow protocols, and over sedating a patient.
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Relief Requested

WHEREFORE, the State of Vermont respectfully requests that the Board warn, reprimand, suspend, revoke, limit, condition, or otherwise discipline Kimberly Ruel's Registered Nurse license.

DATED at Montpelier, Vermont this 16th day of February 2023.

STATE OF VERMONT
SECRETARY OF STATE

By: /s/ Rachel Heath
Rachel Heath
State Prosecuting Attorney
Enforcement Unit
(802) 828-0041
Rachel.Heath@vermont.gov

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