

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

IN RE: MATHEW LEGER License No. 026.0153227	)))	Docket No. 2025-120, 2025-121, 2025- 122
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STIPULATION AND CONSENT ORDER

STIPULATION

NOW COMES the State of Vermont, by and through Prosecuting Attorney Rachel Heath, and Respondent Mathew Leger, by and through his counsel Kevin Lumpkin, Esq., who whereby stipulate and agree as follows:

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”).

Alleged Facts

2. Matthew Leger (“Respondent”) of Dummerston, Vermont is licensed as a Registered Nurse (“RN”) under license number 026.0153227. The State of Vermont first issued this license on April 23, 2024, and the license expires on March 31, 2027.
3. From February 2024 until he was terminated on January 31, 2025, Respondent worked as the “Health Services Director” for an independent boarding and day school (the “school”) that focused on serving neurodivergent learners located in Putney, Vermont.
4. Respondent was to develop a health services program and implement medication administration for students.
5. The school had approximately 30 to 35 students who received daily medications.
6. Respondent had planned to work on creating a record keeping system for medication management and administration over the 2024 summer break but did not.

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7. When an OPR investigator interviewed him, Respondent stated he could not access his office over the summer as a theatre group was using the school campus.
8. Prior to the school year starting, Respondent obtained a health questionnaire sheet.
9. Only some parents filled out this questionnaire.
10. In this questionnaire, Parents were to include a list of medications, directions for dosage and frequency, and the reason for taking the medication.
11. On this health questionnaire, there was space only for one prescriber's name and phone number, even though a student could see a variety of specialists to prescribe various medications.
12. This questionnaire did not include space to adequately gather detailed information from providers on students' diagnoses, physician orders, and prescriptions.
13. When an OPR investigator interviewed him, Respondent stated that he did not have prescriptions and diagnoses for all students.
14. On the first day of school, Respondent had parents provide their children's medication, but Respondent did not have an organized system for documenting what he received and information about the medications or the student's health needs.
15. Respondent kept very little records and did not document his communication with prescribers, pharmacies, or parents, nor did he keep records of communications in an organized or systematic fashion.
16. Respondent did not document training that he had provided to non-medical staff to allow them to administer medication to students.
17. Respondent did not keep records of what medications he received or how much medication he had on hand for students.
18. The only records Respondent had were a list of students that took medications and a sign-off sheet that medications were given to students at generalized times such as "breakfast."
19. This sign-off sheet included all students who took medications.
20. When someone administered the student's medications to them, the person would sign their initials under the corresponding row for the student's name and column for the date.
21. There was no place to document which medications were administered to what students or what the count should be of the medications.

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22. When administering medications, Respondent did not document any observed effects or reactions.
23. In October 2024, parents of student WO discovered their son had not been receiving his prescribed dexamethylphenidate, a controlled substance, due to an issue with the pharmacy.
24. Although the pharmacy had informed Respondent of an insurance reimbursement issue, Respondent did not communicate this concern to student WO's parents.
25. When an OPR investigator asked him about this, Respondent acknowledged that student WO was prescribed several medications that he had received, but that he had not provided student WO with his dexamethylphenidate because he had mistakenly believed the student's bubble packs the pharmacy provided included all of WO's medications when in fact the dexamethylphenidate was not included.
26. Respondent also failed to consistently administer student PM's asthma inhaler in the fall semester and did not inform PM's parent of this.
27. In December 2024, student PM returned home with approximately 15 doses of medication for his bipolar diagnosis that Respondent had failed to administer.
28. Because he was not receiving his medications as prescribed, student PM had trouble regulating his emotions in November 2024.

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.

29. Paragraphs 2 through 28 above are incorporated herein.
30. As an RN, Respondent must provide safe and acceptable patient care.
31. Paragraphs 2 through 28 above demonstrate that Respondent provided unsafe and unacceptable patient care by failing to obtain complete and accurate medical records for each student, including diagnoses and provider information; failing to properly document communication with parents, pharmacies, and prescribers; failing to individually document administering medications for each student and failing to include observed effects and reactions; and failing to maintain a count of medications.
32. 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).

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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.

33. Paragraphs 2 through 28 above are incorporated herein.
34. Under Vermont law, an RN must practice competently by conforming to the essential standards of acceptable and prevailing practice.
35. Essential standards of acceptable care and prevailing practice require a school nurse to obtain up to date medical information for each student who will receive medications. This should include information directly from the provider as to the student's medical condition, diagnosis, symptoms, and medications, including dosage, administration method, and proper storage methods.
36. Paragraphs 4 through 14 above demonstrate that Respondent failed to conform to the essential standards of acceptable and prevailing practice by failing to obtain up to date medical information for each student who would receive medications. This should have included information directly from the provider as to the student's medical condition, diagnosis, symptoms, and medications, including dosage, administration method, and proper storage methods
37. Essential standards of acceptable care and prevailing practice require a school nurse to create or use a Medication Administration Record for each student, which documents the medication administered, including dosage, time of administration, and any observed effects or reactions.
38. Paragraphs 18 through 22 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to create or use a Medication Administration Record for each student, documenting the medication administered, including dosage, time of administration, and any observed effects or reactions.
39. Essential standards of acceptable care and prevailing practice require a school nurse to keep accurate documentation of communication with parents, pharmacies, and providers for students. Essential standards further require school nurses to relay information about a student to the parent.
40. Paragraphs 15 through 26 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to keep accurate documentation of communication with parents, pharmacies, and providers for students, and by failing to relay information about students to their parent(s).

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41. Essential standards of acceptable care and prevailing practice require a school nurse to maintain accurate counts of medication based on administration records and actual counts of the medications.
42. Paragraphs 17 and 21 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to maintain accurate counts of medication based on administration records and actual counts of the medications.
43. Essential standards of acceptable care and prevailing practice require a school nurse to correctly administer all medications to students under their care.
44. Paragraphs 23 through 28 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to correctly administer all medications to students under their care.
45. Essential standards of acceptable care and prevailing practice require a school nurse to document the training provided to non-medical staff to allow them to administer medications to students.
46. Paragraph 16 above demonstrates that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to document the training provided to non-medical staff to allow them to administer medications to students.
47. Essential standards of acceptable care and prevailing practice require a school nurse to appropriately organize communications from parents, pharmacies, and providers, as well as organize medications, documentation of administering those medications, and all other documentation for continuity of care.
48. Paragraphs 14 through 22 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to appropriately organize communications from parents, pharmacies, and providers, as well as organize medications, documentation of administering those medications, and all other documentation for continuity of care
49. 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.

50. Paragraphs 2 through 28 above are incorporated herein.
51. 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.

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52. Paragraphs 2 through 28 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 he failed to put into a place an system for accurately obtaining and tracking medical information of all students, including diagnoses, provider information, medications, dosages, administration method; failed to implement a system for accurately tracking administration of medications, including individually tracking the medications administered to each student, the times, and any observed reactions; and failed to maintain a system for ensuring accurate counts of medications and ensuring timely refills of medications.
53. 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

54. 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 they engaged in the alleged misconduct.
55. Respondent agrees the conditions below are necessary to protect the public.
56. Respondent understands that the 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.
57. Respondent specifically waives any claim that any disclosures made to the Board during review of this agreement have prejudiced Respondent's right to a fair and impartial hearing if this agreement is not accepted and proceeds to a hearing on the merits before the same Board.
58. Respondent has read and reviewed this entire document and agrees it contains the entire agreement between the parties.
59. Respondent is not under the influence of any drugs or alcohol at the time of signing this Stipulation and Consent Order.
60. 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.
61. Respondent voluntarily waives the right to a contested hearing before the Board and waives any right to appeal from this Stipulation and Consent Order.

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62. Respondent understands that he is responsible for all compliance costs associated with this Stipulation and Consent Order.
63. Respondent agrees the Board may enter the Order set forth below.

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 hereby **CONDITIONS** Respondent's nursing license for a **MINIMUM OF ONE YEAR, commencing on the date of entry**. The **CONDITIONS** shall be as follows:
 1. Re-issuance of License. Upon the commencement of these conditions and the renewal of Respondent's license, if expired, 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. The conditions shall remain in place until Respondent has completed all conditions as ordered. Respondent shall be subject to the conditions until Respondent completes a **minimum of one year** of nursing practice in which Respondent works at least eighty (80) hours per month as a registered nurse. Part-time hours of fewer than eighty (80) hours every month shall be credited on a prorated basis. Respondent shall be prohibited from working more than forty (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 and/or correspondence regarding compliance with these conditions shall be submitted to the Case Manager in accordance with the Conditions listed below.
 5. 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 Case Manager, in writing, of Respondent's current place of employment, personal address, and telephone number. Respondent shall further notify the Case Manager, in writing, within forty-eight (48) hours of any change in employment (including resignation or termination), personal address, or telephone number.
 6. Notification to Employers/Educational Programs. Respondent shall provide a copy of this Stipulation and Consent Order to all employers in any current or future setting in which Respondent practices the profession and inform them of

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Respondent's conditional license status. Within ten (10) days of the date of entry of this Consent Order or of any subsequent employment in the profession, Respondent shall cause Respondent's immediate supervisor to submit to the Case Manager an employer agreement form, acknowledging receipt of the Stipulation and Consent Order and the ability to comply with the conditions in the Consent Order. Respondent's employer shall monthly verify Respondent's hours worked on forms the Case Manager provides.

In the event Respondent is attending an educational program which 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 Case Manager a program agreement form provided by the Case Manager, acknowledging receipt of the Stipulation and Consent Order and the ability of the program to comply with the conditions in the Consent Order during the clinical experience.

7. Required Coursework. Respondent shall, within ninety (90) days following the entry of this Order, at his own expense, complete **10 hours** of pre-approved courses, which must include the following topics: safe medication management including record keeping, medication administration for pediatric patients, communication in healthcare, nursing ethics, and professional accountability. For pre-approval, Respondent must submit to the Case Manager the name of each course, the name of the sponsoring organization, and a description of the course content and/or syllabus. Respondent must achieve a passing score on the post-tests for the courses, and submit test results, workbooks completed in full and in a satisfactory manner, and certificates of completion to the Office of Professional Regulation.

Failure to 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.

8. Types of Employment Prohibited. **Respondent shall not work as a solo practitioner or in a setting where he is the only licensed registered nurse.** Respondent shall not work in a supervisory role. Respondent shall not work for a school (including private school), during the effective period of this Consent Order.
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 Case Manager or its designee. The Case Manager will approve out-of-state practice provided Respondent can still comply with the requirements of this Consent Order. If Respondent receives discipline on a professional license held in another state during the conditioned period, Respondent must inform the Case Manager of such, in writing, within ten (10) days of receiving such discipline.

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10. Notification to Other States. In the event Respondent is licensed as a registered nurse in any other state(s), Respondent must inform the licensing board of the state(s) in which Respondent is licensed of the conditional status of Respondent's Vermont license within thirty (30) days of the date of entry of this Order.

11. Costs. Respondent shall bear all costs of complying with this Consent Order.

12. 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 resolved.

13. Completion of Conditional License Period. Respondent shall submit a petition to the Docket Clerk to remove any and all conditions from Respondent's license. The State will support or oppose Respondent's petition. The Board will conduct a hearing if necessary. Respondent bears the burden and must present proof that Respondent has fully complied with the terms of this Order and these conditions are no longer necessary to protect the public.

- C. Notwithstanding any provision above, the Respondent must continue to meet all requirements for maintaining a license, license renewal and license reinstatement.
- D. 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).
- E. Under 3 V.S.A. 129(I), this stipulation and consent order applies to all licenses this Board issues to Respondent.
- 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:

STATE OF VERMONT
SECRETARY OF STATE

Dated: 3/6/2026

By: _____

Signed by:
Rachel Heath
FCA249D7D29242B...
Rachel Heath
Prosecuting Attorney

RESPONDENT

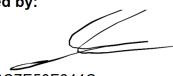
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Dated: 3/6/2026

By:

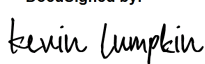
Signed by:

74500C7E50E644C
Mathew Leger

APPROVED AS TO FORM:

COUNSEL FOR RESPONDENT

Dated: 3/6/2026

By:

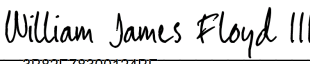
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Kevin Lumpkin, Esq.

APPROVED AND SO ORDERED:

VERMONT BOARD OF NURSING

Dated: 4/14/2026

By:

Signed by:

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Chairperson

Date of Entry: 4/15/2026

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BOARD OF NURSING**

IN RE:	)	
MATHEW LEGER	)	Docket No. 2025-120
License No. 026.0153227	)	2025-121
		2025-122

SPECIFICATION OF CHARGES

NOW COMES the State of Vermont and makes the following charges against Registered Nurse Mathew Leger:

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. Matthew Leger (“Respondent”) of Dummerston, Vermont is licensed as a Registered Nurse (“RN”) under license number 026.0153227. The State of Vermont first issued this license on April 23, 2024, and the license expires on March 31, 2027.
3. From February 2024 until he was terminated on January 31, 2025, Respondent worked as the “Health Services Director” for an independent boarding and day school (the “school”) that focused on serving neurodivergent learners located in Putney, Vermont.
4. Respondent was to develop a health services program and implement medication administration for students.
5. The school had approximately 30 to 35 students who received daily medications.
6. Respondent had planned to work on creating a record keeping system for medication management and administration over the 2024 summer break but did not.
7. When an OPR investigator interviewed him, Respondent stated he could not access his office over the summer as a theatre group was using the school campus.
8. Prior to the school year starting, Respondent obtained a health questionnaire sheet.

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9. Only some parents filled out this questionnaire.
10. In this questionnaire, Parents were to include a list of medications, directions for dosage and frequency, and the reason for taking the medication.
11. On this health questionnaire, there was space only for one prescriber's name and phone number, even though a student could see a variety of specialists to prescribe various medications.
12. This questionnaire did not include space to adequately gather detailed information from providers on students' diagnoses, physician orders, and prescriptions.
13. When an OPR investigator interviewed him, Respondent stated that he did not have prescriptions and diagnoses for all students.
14. On the first day of school, Respondent had parents provide their children's medication, but Respondent did not have an organized system for documenting what he received and information about the medications or the student's health needs.
15. Respondent kept very little records and did not document his communication with prescribers, pharmacies, or parents, nor did he keep records of communications in an organized or systematic fashion.
16. Respondent did not document training that he had provided to non-medical staff to allow them to administer medication to students.
17. Respondent did not keep records of what medications he received or how much medication he had on hand for students.
18. The only records Respondent had were a list of students that took medications and a sign-off sheet that medications were given to students at generalized times such as "breakfast."
19. This sign-off sheet included all students who took medications.
20. When someone administered the student's medications to them, the person would sign their initials under the corresponding row for the student's name and column for the date.
21. There was no place to document which medications were administered to what students or what the count should be of the medications.
22. When administering medications, Respondent did not document any observed effects or reactions.

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24. Although the pharmacy had informed Respondent of an insurance reimbursement issue, Respondent did not communicate this concern to student WO's parents.
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27. In December 2024, student PM returned home with approximately 15 doses of medication for his bipolar diagnosis that Respondent had failed to administer.
28. Because he was not receiving his medications as prescribed, student PM had trouble regulating his emotions in November 2024.

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.

29. The State re-alleges and incorporates Paragraphs 2 through 28 above.
30. As an RN, Respondent must provide safe and acceptable patient care.
31. Paragraphs 2 through 28 above demonstrate that Respondent provided unsafe and unacceptable patient care by failing to obtain complete and accurate medical records for each student, including diagnoses and provider information; failing to properly document communication with parents, pharmacies, and prescribers; failing to individually document administering medications for each student and failing to include observed effects and reactions; and failing to maintain a count of medications.
32. 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).

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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.

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41. Essential standards of acceptable care and prevailing practice require a school nurse to maintain accurate counts of medication based on administration records and actual counts of the medications.
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46. Paragraph 16 above demonstrates that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to document the training provided to non-medical staff to allow them to administer medications to students.
47. Essential standards of acceptable care and prevailing practice require a school nurse to appropriately organize communications from parents, pharmacies, and providers, as well as organize medications, documentation of administering those medications, and all other documentation for continuity of care.
48. Paragraphs 14 through 22 above demonstrate that Respondent failed conform to the essential standards of acceptable and prevailing practice by failing to appropriately organize communications from parents, pharmacies, and providers, as well as organize medications, documentation of administering those medications, and all other documentation for continuity of care
49. 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).

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53. 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).

Relief Requested

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

DATED at Montpelier, Vermont this 22nd day of July 2025.

STATE OF VERMONT
SECRETARY OF STATE

By: /s/ Rachel Heath
Rachel Heath
State Prosecuting Attorney
Enforcement Unit
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