

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

IN RE:
SARAH G. STANLEY
License No. 026.0041682

Docket No. M2013-57

REINSTATEMENT STIPULATION AND CONSENT ORDER

STIPULATION

NOW COME the State of Vermont, by and through State Prosecuting Attorney Elizabeth A. Jarvis, and the Respondent, Sarah G. Stanley, who 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(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.

Statement of Facts

2. Sarah G. Stanley (the "Respondent"), of Fair Haven, Vermont is licensed by the State of Vermont as a Registered Nurse under license number 026.0041682. This license was originally issued on or about April 23, 2008. This license was indefinitely suspended on or about July 10, 2013, pursuant to a Default Order on Docket Number 2011-501. See Attachment A. The Respondent's license is currently suspended.
3. Respondent is seeking reinstatement. Respondent has obtained an independent evaluation that states she is fit to practice if given a conditional license. The Investigatory Team is comfortable issuing her a conditional license.

Understandings

4. Respondent admits the facts above are true and that the conditions below are necessary to protect the public.
5. 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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6. 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.
7. Respondent has read and reviewed this entire document and agrees that it contains the entire agreement between the parties.
8. Respondent is not under the influence of any drugs or alcohol at the time she signs this Stipulation and Consent Order.
9. 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.
10. 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.
11. 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 **CONDITIONS** Respondent's license and/or re-entry permit. Respondent's license will be **CONDITIONED FOR A MINIMUM OF THREE (3) YEARS** commencing with the date of reinstatement. The conditions will be as follows:
 1. Re-issuance of License. Upon the commencement of these conditions, Respondent shall be issued a license and/or re-entry permit and it shall be labeled "conditioned."
 2. Length of Time of Conditions Imposed. The conditions shall remain in place until Respondent has completed all conditions ordered. Respondent shall be subject to the conditions until Respondent completes a **minimum of three (3) years** of supervised nursing in which she works at least forty (40) hours every two (2) weeks as a nurse. Part time hours of less than forty (40) hours every two (2) weeks shall be credited on a prorated basis. Respondent shall be prohibited from working more than forty (40) hours per week.
 3. Completion of Substance Abuse Counseling, Treatment Plan, Treatment Reports and recovery groups. Respondent shall continue substance abuse counseling and comply with her substance abuse treatment plan until the treating professional certifies in writing to the Board that such counseling is no longer necessary.

Respondent shall authorize Respondent's treating professional to submit to the Board **monthly** reports on forms issued by the Board. Respondent shall authorize

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Respondent's treating professional to provide all information requested by the Nursing Board, either orally or in writing, at any time during the period this Consent Order is in effect.

Respondent shall participate as recommended by Respondent's treating professional in substance abuse recovery group(s), and shall submit **quarterly** reports documenting such attendance on forms issued by the Board.

4. Random Drug and Alcohol Testing.

Respondent shall submit to random drug and alcohol screenings at the request of the Board or its designee. Respondent shall designate a person or entity that has been pre-approved by the Board or its designee to administer random drug and alcohol screens. All testing shall be done on a random, unannounced basis and analyzed by a lab qualified to analyze samples for forensic purposes and approved by the Board. All urine specimens collected for tests shall be collected in an observed setting. All screens shall be negative.

Failure to appear for, refusal to provide, adulteration of, dilution of, or tampering with a sample for any urine screen shall cause that screen to be presumed positive. Any positive screen shall constitute a violation of this Order.

5. Abstain from Drug and Alcohol Use. Respondent shall abstain completely from the consumption or possession of alcohol and drugs.

6. Drug Use Exception. Respondent may take scheduled/controlled medications lawfully prescribed for a bona fide illness or condition by a health care practitioner disclosed to the Board in writing by Respondent within forty-eight (48) hours of the prescription. Respondent health care practitioner shall inform the Board, in writing and on appropriate letterhead, of knowledge of Respondent's substance abuse issue(s) within seven (7) days of entering into the practitioner/patient relationship. Additionally, the practitioner shall inform the Board of all scheduled/controlled medications prescribed – and the anticipation of how long such prescriptions will need to be taken – within seven (7) days of the prescription.

The Board or its designee may request that the practitioner document the necessity for the prescribed scheduled/controlled medications or other medications known to have abuse potential. It is not anticipated that Respondent would be prescribed scheduled/controlled medication during the term of this Consent Order for a period greater than fourteen (14) days, but if so, then the conditions herein may be revoked by the Board.

Respondent shall provide the Board with a current medication list of any medications taken on a scheduled or as-needed basis on forms issued by the Board within seven (7) days of the date of reinstatement and shall update this list within forty-eight (48) hours of any change in these medications.

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7. 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.

In the event Respondent is attending a nursing program or re-entry 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 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.

8. Reports from Employers/Program Director. Within one (1) month of the date of reinstatement or within one (1) 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. Moreover, on a **quarterly** basis, these reports shall include the results of the employer's medication audits of Respondent's medication administration and practices. In the event Respondent is attending a nursing program or re-entry 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 issued by the Board. All employer reports shall indicate satisfactory performance (i.e., consistently meeting all standards of nursing practice) and attendance.
9. Practice Under Supervision. Respondent shall practice as a nurse only in a setting where Respondent has direct supervision for the entire shift by a licensed registered nurse that is in good standing with the Board.
10. Administration of Medications. Respondent is prohibited from administering any controlled substances. This condition may be removed only by Respondent filing a petition with the Board after Respondent has worked as a registered nurse for six (6) months for at least forty (40) hours every two weeks (or the part time equivalent) after the date of reinstatement.

In any such petition, Respondent must demonstrate, to the satisfaction of the Nursing Board or its designee, that Respondent can safely and competently administer such medications. Respondent must include appropriate support, in writing, from Respondent's treating professional and employer or nursing school administrator and a description of the documentation and inventory control procedures in place.

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The removal of this prohibition shall not automatically result in the reinstatement of all medication privileges. The Board may gradually restore those privileges through whatever intermediary steps it determines are appropriate.

11. 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.
12. Interview with the Board or its Designee. Respondent shall appear in person for interviews with the Board or its designee upon request.
13. 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. 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.
14. 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.
15. Notification to Other States. In the event that 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.
16. License Renewal. This Order does not automatically extend the license and Respondent must comply with the Board of Nursing requirements for license renewal and/or reinstatement.
17. Release of Information Forms. This Order requires Respondent to authorize drug and/or alcohol treatment providers to report information in verbal and/or written format and/or to discuss Respondent and any and all treatment rendered to Respondent for drugs and/or alcohol with the Board or its designee. Any and all of this information may be provided to the Office of Professional Regulation investigators, and that the information may be used for further prosecutions if so warranted or if the Office of Professional Regulation determines that said information

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violates the terms of this Order or any rules or laws governing the profession of nursing.

Respondent is entitled to revoke this consent at any time. However, any revocation shall be considered a violation of this Order. This consent expires when the conditions are removed from Respondent's nursing license.

This Stipulation and Consent Order shall itself constitute a valid written consent pursuant to the requirements of 42 C.F.R. § 2.31. Respondent understands that Respondent's treatment provider may require Respondent's to sign a separate and distinct consent meeting the requirements of 42 C.F.R. § 2.31.

18. Costs. Respondent shall bear all costs of complying with this Consent Order.
 19. 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.
 20. Completion of Conditional License Period. Respondent must petition the Board, or its designee, to remove any and all conditions on Respondent's license. Respondent must present proof that Respondent has fully complied with the terms of this Order. Respondent must also present proof of successful substance abuse rehabilitation, that Respondent poses no danger to the public or the practice of nursing, and that Respondent can safely and competently perform the duties of a licensed nurse.
- B. Notwithstanding any provision above, the Respondent must continue to meet all Board requirements for maintaining a license, license renewal, and license reinstatement.
 - C. 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).
 - D. 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.

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AGREED TO:

Dated:

6/10/16

STATE OF VERMONT
SECRETARY OF STATE

By:

Elizabeth A. Jarvis
Elizabeth A. Jarvis
State Prosecuting Attorney

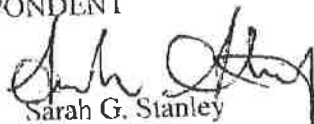
Dated: 6-10-16

APPROVED AND SO ORDERED:

Dated: 6/13/16

Date of Entry: 6/14/16

SARAH G. STANLEY
RESPONDENT

By: 
Sarah G. Stanley

VERMONT BOARD OF NURSING

By: 
Chairperson

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**STATE OF VERMONT
BOARD OF NURSING**

In re: Sarah G. Stanley
License No. 026-41682

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Docket No. 2011-501(RN)

Appearances:

Prosecuting the case: Gabriel Gilman
Respondent: Did not appear

Presiding Officer: Larry S. Novins

DEFAULT ORDER

The Board held a hearing on the above matter on July 8, 2013 at the Office of Professional Regulation conference room at the Capitol Plaza in Montpelier, Vermont. Ms. Stanley did not attend and was not represented by counsel.

Findings of Fact

1. Ms. Stanley was licensed as a registered nurse. Her license expired on March 31, 2013. She remains subject to the regulatory authority of this Board. 3 V.S.A. §§ 129, 129a, 814(d) expired people, 26 V.S.A. § 1582(a), the Administrative Rules of the Board of Nursing, and the Rules of the Office of Professional Regulation.
2. On February 12, 2013 Ms. Stanley was sent a Notice of Charges in this matter by certified mail to her last known address. A copy of the Specification of Charges is attached to this Default Order.
3. OPR Rule 3.3 requires that an Answer be filed within 20 days of the date on which the notice of charges was mailed by the Director.
4. Licensees are required to notify the Board of any change of address within 30 days. 3 V.S.A. § 129a(a)(14).
5. Ms. Stanley received the Specification of Charges. She filed a brief "answer" saying she disputed "all charges."
6. The prosecuting attorney filed a motion to strike her answer for non-compliance with OPR rules. The motion was granted and Ms. Stanley was told to file an amended answer no later than June 5, 2013. The notice to her warned: "If Ms. Stanley fails to file an appropriate Answer, this matter shall be set as soon as possible for Default hearing."
7. The Order was mailed to Ms. Stanley via certified mail. It was returned as "unclaimed, unable to forward."
8. Ms. Stanley did not file an amended answer.
9. On June 25, 2013 notice of today's hearing was mailed to Ms. Stanley. The file contains no further correspondence or indication that Ms. Stanley received or did not receive the notice. However, on this date Ms. Stanley contacted the prosecuting attorney with an explanation of why she had not filed an amended answer. She was aware of today's default hearing.
10. Ms. Stanley has still not answered the charges.

11. Upon hearing the Prosecution's presentation and taking notice of its own file, the Board finds Ms. Stanley to be in Default. The allegations contained in the Specification of Charges are therefore treated as the facts on which the Board's Order is based. OPR Rule 3.4, 3 V.S.A. § 809(d) and 3 V.S.A. § 814(c).

Conclusions of Law

Ms. Stanley has received actual notice of the charges in this matter as indicated by the Board's file and the Prosecution's presentation. Because Ms. Stanley has failed to an appropriate answer the charges as ordered, the factual allegations in the Stipulation and Consent Order are treated as if proved. O.P.R. Rule 3.4. Accordingly, the Board finds, in this Default Hearing held pursuant to 3 V.S.A. §809(d), that Ms. Stanley has engaged in the unprofessional conduct alleged in the Specification of Charges.

Order

In accordance with the above Findings of Fact and Conclusions of Law, Ms. Stanley's privilege to reinstate her license is hereby **Suspended Indefinitely**, effective as of the date of the hearing. Should Ms. Stanley apply for reinstatement, the Board at that time will determine whether any conditions can permit her to resume practice while protecting public health and safety.

Appeal Rights

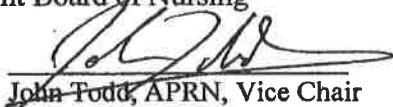
This is a final administrative determination by the Vermont Board of Nursing.

A party aggrieved by a final decision of a board may appeal this decision by filing a written Notice of Appeal with the Director of the Office of Professional Regulation, Vermont Secretary of State, 89 Main St., Fl. 3, Montpelier, VT 05620-3402 within 30 days of the entry of this order.

If an appeal is filed, the Director of the Office of Professional Regulation shall assign the case to an appellate officer. The review shall be conducted on the basis of the record created before the board. In cases of alleged irregularities in procedure before the board, not shown in the record, proof on that issue may be taken by the appellate officer. 3 V.S.A. §§ 129(d) and 130a.

To request a stay of the Board's decision, please refer to the attached stay instructions.

Vermont Board of Nursing

By: 
John Todd, APRN, Vice Chair

Date: July 8, 2013

OFFICE OF PROFESSIONAL REGULATION

DATE OF ENTRY: 7-10-13

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

IN RE:

SARAH G. STANLEY

License No. 026.0041682

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Docket No. 2011-501

SPECIFICATION OF CHARGES

NOW COMES the State of Vermont and makes the following Charges against the respondent, Sarah G. Stanley, RN:

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(a); 3 V.S.A. § 129a; 3 V.S.A. § 814(d); 26 V.S.A. § 1582; the Administrative Rules of the Board of Nursing (the "ARBN"); and the Rules of the Office of Professional Regulation.

Statement of Facts

2. Sarah Stanley ("Respondent") of Fair Haven, Vermont is licensed by the State of Vermont as a Registered Nurse under license number 026.0041682. This license was originally issued on or about April 23, 2008 and expires on or about March 31, 2013.
3. At all times relevant, Respondent was employed as a Registered Nurse with Rutland Area Visiting Nurse Association and Hospice ("VNA") in Rutland, Vermont.
4. On or about August 1, 2011, Respondent removed a bottle of Percocet tablets, containing approximately 47 tablets, from patient D.W.'s residence during a home visit. Respondent told D.W.'s daughter, S.G., that she had to take the medication back to the office so someone could watch her waste them. In her nursing notes for the visit, Respondent documented that she wasted the Percocet in the home using Green Z with the patient's wife and step-daughter present.
5. On or about August 2, 2011, at approximately 8:40 AM, Respondent told two other employees of the VNA, N.H., RN and T.B., that she had to remove Percocet from D.W.'s residence because there was a daughter in the home who was a "pill

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head." Respondent stated she couldn't waste the medication in the home because she didn't have any Green Z.

6. Later in the day on August 2, the VNA was notified that D.W. had passed away and Respondent went to the death visit. Respondent returned to the VNA with Haldol and Ativan that was prescribed to D.W. Respondent told N.H., RN, W.D., RN, and N.M., RN that she couldn't waste the medication in the residence because she used the last of her Green Z to waste the Percocet the day before.
7. D.W.'s daughter, C.L. was present during the death visit on August 2, 2011. On or about August 22, 2011, in an interview with Investigator Greg Kelly of the Office of Professional Regulation, C.L. stated that Respondent told her she needed to remove any heavy duty medication from the residence.
8. On or about August 15, 2011, in an interview with Investigator Kelly, Respondent initially insisted she wasted the Percocet in D.W.'s residence. Later in the interview, Respondent stated she did not believe she took the Percocet out of the residence and stated, "In some manner or form, I wasted it." When asked if it was possible that she took the Percocet from D.W.'s home, Respondent stated, "Anything's possible."
9. The essential standards of acceptable and prevailing nursing practice call for complete and accurate recordkeeping concerning wasted medication.

Charges

The act(s), omission(s), and/or circumstance(s) described above constitute grounds for discipline because the Respondent has committed unprofessional conduct in violation of:

- a. 26 V.S.A. § 1582(a)(3) (Is unable to practice nursing competently by reason of any cause) which includes performing unsafe or unacceptable patient care pursuant to ARBN Rule 11.2(b)(1) and failure to conform to the essential standards of acceptable and prevailing nursing practice pursuant to ARBN Rule 11.2(b)(2);
- b. 26 V.S.A. § 1582(a)(7) (Engages in conduct of a character likely to deceive, defraud, or harm the public) which includes diverting supplies, equipment, or drugs for personal or other unauthorized use pursuant to ARBN Rule 11.2(d)(4) and falsifying or altering clinical records or making inaccurate or misleading entries pursuant to ARBN Rule 11.2(d)(3);
- c. 3 V.S.A. § 129a(a)(7) (Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing reports or records or willfully failing to file the proper reports or records);

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Office of
Professional Regulation
National Life Building
Second Floor North
Montpelier, VT
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- d. 3 V.S.A. § 129a(b)(1) and (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: (1) performance of unsafe or unacceptable patient or client care; or (2) failure to conform to the essential standards of acceptable and prevailing practice); and
- e. 3 V.S.A. § 129a(a)(3) (Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession).

Relief Requested

WHEREFORE, the license of Sarah Stanley, RN, should be revoked, suspended, reprimanded, conditioned, or otherwise disciplined.

DATED at Montpelier, Vermont this 23rd day of January, 2013.

STATE OF VERMONT
SECRETARY OF STATE

By: 

Gabriel M. Gilman
State Prosecuting Attorney

nu.stanley.soc

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Prosecuting Attorney
Office of
Professional Regulation
National Life Building
Second Floor North
Montpelier, VT
05620-3602