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

IN RE:	)	
HOLLY JEAN WILLIAMS	)	Docket No. NU10-0708
License No. 026-0022002	)	2008-261

STIPULATION AND CONSENT ORDER

STIPULATION

NOW COMES the State of Vermont, by and through State Prosecuting Attorney Edward G. Adrian, and the Respondent, Holly Jean Williams, R.N., 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. § 1582; the Administrative Rules of the Board of Nursing ("ARBN"); and the Rules of the Office of Professional Regulation.

Statement of Facts

2. Holly Jean Williams (the "Respondent") of South Burlington, Vermont is a registered nurse holding license number 026-0022002, issued by the State of Vermont. This license was originally issued on February 22, 1995 and is currently set to expire March 31, 2009.

3. At all relevant times the Respondent was employed at Fletcher Allen Health Care (the "Facility") located in Burlington, Vermont.

4. On or about July 16, 2008, the Office of Professional Regulation received a report from the Facility indicating that the Respondent was suspected of possible drug diversion due to Respondent appearing in the Facility's PYXIS machine (a drug dispensing system used by staff) as being one of the highest users of several medications, as well as Respondent withdrawing medications from the PYXIS for several patients who were not assigned to her, without documenting in those patients' Medication Administration Records ("MARs") that those medications had been administered to patients.

5. The Facility had been concerned about the Respondent's activities since June 2006

when a report was received from New York law enforcement authorities that the Respondent's boyfriend was in possession of a rental storage unit that had weapons, marijuana, chemicals used to produce crystal methamphetamine, and various controlled substances. The Facility was advised that the Respondent at that time indicated that there were times that she accidently brought home medications in her pockets.

6. On or about July 17, 2008, Investigator Greg Kelly interviewed nurse T.B. who expressed concern that the previous weekend, nurse M.C. had indicated that the Respondent was medicating one of M.C.'s patients. Based on this report, the Facility ran a 30 day review of the PYXIS records to determine whether the Respondent was medicating patients to whom she was not assigned. The Report, together with the medication administration records and the patient's flow sheets, indicate as follows:

   a. On or about June 15, 2008, the Respondent removed a Hydromorphone ampule 1mg/1ml at 10:15 AM from the PYXIS for patient E.P. who was the patient of nurse D.R. 0.8 mg was wasted and witnessed by nurse J.C. However, no dose was documented on the MAR and there was no pain documented by any assigned nurses in the 24 hour period.

   b. On or about June 19, 2008, the Respondent removed two tabs of Oxycodone IR 5mg from the PYXIS for patient J.S. at 8:32 AM and again at 12:09 PM. J.S. was the patient of Nurse P.J. and P.J. had not documented any pain on the flow sheets. The Respondent did not document administration of the Oxycodone IR in the MAR.

   c. On or about June 19, 2008, the Respondent withdrew Hydromorphone 1mg/1ml ampule for patient J.R. at 2:39 PM and again at 2:57 PM. P.J. was the nurse of J.R. and documented Dilaudid 1mg given at 2:35 PM. The second dose that was withdrawn from the PYXIS 18 minutes later was not documented anywhere.

   d. On or about June 20, 2008, the Respondent withdrew 10 tablets of Morphine IR 15 mg at 3:00 PM for patient B.B. This was not documented in the MAR and B.B. was nurse S.D.'s patient, not the Respondent's.

   e. On or about June 20, 2008, the Respondent withdrew a 10 mg Morphine ampule at 12:33 PM from the PYXIS for patient M.S who as assigned to nurse M.D. 9 mg was documented as wasted and witnessed by nurse J.N. at 3:47 PM. M.S. did not have an order for the Morphine. Nothing was documented on the MAR and the waste occurred over three hours after being withdrawn.

   f. On or about July 11, 2008, the Respondent withdrew 2 tabs of Morphine IR 15mg for patient J.C. from the PYXIS at 9:53 AM and administered for 8/10 pain and 6:54 PM and administered for 7/10 pain. J.C. was assigned to nurse M.C. at the time who was not aware that the patient had been medicated or

needed to be medicated.

g. On or about July 11, 2008 for patient L.F., the Respondent withdrew Hydromorphone 1mg ampule and documented .4 mg given for 7/10 pain at 1:02 PM. The Respondent withdrew the same amount at 7:45 PM and documented .4 given for 9/10 pain. L.F. was the patient of nurse N.S. at the time. The documented dose was double the .2 mg ordered. No waste was recorded. No other nurse gave pain medication in the surrounding 24 hours.

h. On or about July 12, 2008 for patient L.F., the Respondent withdrew Hydromorphone 1mg ampule and documented .4 mg given for 7/10 pain at 10:19 AM. The Respondent withdrew the same amount at 4:57 PM and documented .4 given for 6/10 pain. L.F. was the patient of nurse M.D. at the time. The documented dose was double the .2 mg ordered. No other nurse gave pain medication in the surrounding 24 hours.

i. On or about July 12, 2008, the Respondent withdrew 2 tabs of Morphine IR 15mg for patient J.C. from the PYXIS at 10:47 AM and administered for 9/10 pain. At that time J.C. was assigned to nurse M.C. who was not aware that the patient had been medicated. The Respondent withdrew 2 tabs of Morphine IR 15mg for patient J.C. from the PYXIS at 4:55 P.M. and administered for 8/10 pain. At that time J.C. was assigned to nurse J.S. who was not aware that the patient had been medicated. The Respondent was not cross-covering for these patients and was assigned patients at the other end of the hall.

j. On or about July 12, 2008, the Respondent withdrew 3 tables of Hydromorphone 2 mg at 8:24 AM and again at 2:32 PM for patient T.B. T.B. only had an order for 5 mg and no waste was indicated in the MAR for the left over 1 mg each time the Hydromorphone was administered.

k. On or about July 18, 2008 for patient L.F., the Respondent withdrew Hydromorphone 1mg ampule and documented .4 mg given for 6/10 pain at 8.17 AM withdrew the same at 12:59 PM and documented .4 given for 5-6/10 pain. L.F. was the patient of the Respondent at the time. The documented dose was double the .2 mg ordered. No other nurse gave pain medication in the surrounding 24 hours.

7. On or about July 18, 2008, Investigator Kelly went to the residence of the Respondent to question her about these incidents. Upon questioning the Respondent started crying and indicated that she was being represented by Attorney John Pacht who had advised her not to discuss the matter.

8. On or about July 21, 2008, the Office of Professional Regulation received a report from the Facility indicating that based on an initial investigation of possible drug diversion, the Respondent had been put on paid leave pending a complete

investigation.

9. On or about July 22, 2008, Attorney Pacht spoke with Investigator Kelly and indicated that the Respondent was in a difficult place and that it did not make sense for her to participate in an interview.

10. The Board summarily suspended the Respondent's license to practice registered nursing on August 11, 2008.

Charges

11. 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. 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); and

b. 26 V.S.A. § 1582(a)(3) (Is unable to practice nursing competently by reason of any cause) which includes, but is not limited to, reasons of physical or mental disability or use of drugs, narcotics, chemicals, or any other type of materials pursuant to ARBN Chapter 4, Rule IV(II)(C).

Understandings

12. This Stipulation is neither an admission of liability by the Respondent nor a concession by the State of Vermont that its charges are not well founded. To avoid delay, uncertainty, inconvenience, and expense of protracted litigation of the charges above the Parties reach a full and final Stipulation pursuant to these Understandings and the Order below. The Respondent does not dispute that the State could prove these charges by a preponderance of the evidence if this matter went to a hearing and agrees that the conditions below are necessary to protect the public.

13. 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.

14. 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.

15. Respondent has read and reviewed this entire document and agrees that it contains the entire agreement between the parties.

16. Respondent is not under the influence of any drugs or alcohol at the time she signs this Stipulation and Consent Order.

17. 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.

18. 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.

19. 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 **INDEFINITELY SUSPENDS** the Respondent's license to practice nursing for a **MINIMUM OF SIX (6) MONTHS, retroactive to the date of Respondent's summary suspension, August 11, 2008.** Before applying for reinstatement, Respondent must: 1) obtain an independent evaluation report by a licensed professional specializing in drug and alcohol abuse pre-approved by the Board; 2) the results of the report with the drug and alcohol abuse independent evaluator must indicate that the Respondent does not present a risk to the safety, health or welfare of her potential patients; and 3) Respondent must submit to the Board the results of a minimum of three (3) random urine analyses administered by a person who has been pre-approved by the Board, and analyzed by a lab qualified to analyze samples for forensic purposes and pre-approved by the Board. The Respondent's license shall not be reinstated until these prerequisites are met, regardless of whether more than six (6) months have passed since the suspension went into effect. Once reinstated, Respondent's license will be **CONDITIONED FOR THREE (3) YEARS**. The conditions will be as follows:

(1) Re-issue of License.

Upon the commencement of these conditions, Respondent shall be issued a license 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 registered nursing in which she works at least forty (40) hours every two (2) weeks as a registered 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 and Treatment Plan.

Respondent shall enter into and continue substance abuse counseling with a treating professional pre-approved by the Board until the treating professional shall certify in writing to the Board that such counseling is no longer necessary. Respondent shall enter into and

comply with the substance abuse treatment plan approved by the Board and the treating professional.

(4) Notification to Treating Professional.

Respondent shall provide a copy of this Stipulation and Consent Order to her treating professional and cause her treating professional to inform the Board, in writing and on professional letterhead, of receipt of the Stipulation and Consent Order and the treating professional's ability to comply with the conditions related to treatment and with all other terms of this Consent Order.

(5) Reports from Treating Professional.

Respondent shall authorize and cause her treating professional to submit to the Board evidence of satisfactory progress with the treatment plan during the effective period of this Consent Order. These reports shall be submitted in writing on forms issued by the Board. The first report is due commencing the month after the date of the commencement of the conditions and subsequent reports are due **monthly** thereafter.

Respondent shall authorize her 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.

(6) Participation in Recovery Groups.

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

(7) 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, who 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 act as a violation of this Order.

(8) Abstain from Drug and Alcohol Use.

Respondent shall abstain completely from the consumption or possession of alcohol and drugs with the exception of medications as outlined in paragraph A.(9) for the period of time described in A.(2).

(9) Drug Use Exception.

Respondent shall not take controlled substances unless necessary. Respondent may take scheduled/controlled medications lawfully prescribed for a bona fide illness or condition by a physician, dentist, or nurse practitioner whose identity shall be made known to the Board in writing by Respondent within forty-eight (48) hours of the establishment of the

practitioner/patient relationship. Respondent shall ensure that the physician, dentist or nurse practitioner informs the Board, in writing and on appropriate letterhead, of knowledge of Respondent's substance abuse issue(s) within one (1) week of entering into the practitioner/patient relationship. Respondent shall inform the Board in writing of all scheduled/controlled medications prescribed, including the name of the prescribing practitioner, within forty-eight (48) hours of receiving the prescription.

The Board or its designee may request at any time that the practitioner document the continued necessity for the prescribed scheduled/controlled medications if the term exceeds fourteen (14) days. This includes medications to be administered as necessary. 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 keep a written record of all medications taken, including over the counter drugs, and produce such record upon the request of the Board or its designee.

(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 registered 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 registered nursing employment, Respondent shall cause Respondent's immediate supervisor to write to the Board, on the employer's letterhead, acknowledging receipt of the Stipulation and Consent Order and the ability to comply with the conditions in the Consent Order.

In the event the Respondent is attending a nursing program, Respondent shall cause the Program Director to write to the Board, on school letterhead, acknowledging receipt of the Stipulation and Consent Order and ability of the program to comply with the conditions in the Consent Order during clinical experience.

(11) Reports from Employers.

Within one (1) month of the date of entry of this Order or within one (1) month of the commencement of registered nursing employment and **monthly** thereafter, Respondent shall cause every nursing employer the Respondent has worked for during the month to submit to the Board an evaluation of Respondent's work performance and attendance during that month. This report shall be submitted in writing on forms issued by the Board.

In the event the 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 her performance and attendance. This report shall be submitted in writing on forms issued by the Board and accompanied by a cover letter on the school's letterhead.

(12) Practice Under Supervision.

Respondent shall practice as a registered 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.

(13) Administration of Medications.

Respondent is prohibited from administering any controlled substances. This condition may be removed only by the Respondent filing a petition with the Board after she has worked as a registered nurse for twelve (12) weeks for at least forty (40) hours every two weeks (or the part time equivalent) after the date of reinstatement.

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

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.

(14) 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 during the effective period of this Consent Order.

(15) Interview with the Board or its Designee.

Respondent shall appear in person for interviews with the Board or its designee upon request.

(16) 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 prior to Respondent practicing nursing outside the State of Vermont. If Respondent fails to receive such approval before practicing nursing outside the State of Vermont, none of the time spent practicing nursing out-of-state will be credited toward the fulfillment of the terms and conditions of this Consent Order. The Board will approve out-of-state nursing practice so long as the Respondent can still comply with the provisions of this Consent Order.

(17) Notification of Place of Employment/Personal Address/Telephone Number.

Within five (5) days of the date of entry of this Consent Order, Respondent shall notify the Board, in writing, of her 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, personal address, or telephone number.

(18) Notification to Other States.

In the event that the Respondent is licensed in nursing in any other state(s), she must inform the nursing licensing board of the state(s) in which the Respondent is licensed of the conditional status of her Vermont registered nursing license within thirty (30) days of the date of entry of this Order. If the Respondent fails to provide such notification, it will be considered a violation of this Order.

(19) License Renewal.

If the Respondent's license expires while this Order is still in effect, this Order does not automatically extend the license. In that situation, in order to continue to practice as a registered nurse, the Respondent must timely apply for renewal, pay the applicable fee and demonstrate that she has otherwise complied with the requirements for license renewal.

(20) Release of Information Forms.

The conditions of this Order require the Respondent to authorize drug and/or alcohol treatment providers to report information in verbal and/or written format and/or to discuss the Respondent and any and all treatment rendered to the Respondent for drugs and/or alcohol with the Board or its designee. The conditions of this Order must allow any and all information from the Respondent's treatment providers to also 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 violates the terms of this Order or any rules or laws governing the profession of nursing.

The Respondent is entitled to revoke this consent at any time. However, any revocation by the Respondent of such consent to disclosure during the term of this Order shall be considered a violation of this Order.

This consent expires when the conditions are removed from the Respondent's registered nursing license.

This Stipulation and Consent Order shall constitute a valid written consent pursuant to the requirements of 42 C.F.R. § 2.31.

The Respondent understands that her treatment provider may require her to sign a separate and distinct consent meeting the requirements of 42 C.F.R. § 2.31.

(21) Costs.

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

(22) Violation of this Order.

If the Respondent violates the terms of this Order in any respect, the Board, after giving the 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 the Respondent during the term of this Order, this Order shall be automatically extended until the unprofessional conduct matter is concluded.

(23) Completion of Conditional License Period.

After the conditional license period, the Respondent may petition the Board to remove any and all conditions on her license. The Respondent must present proof that she has fully complied with the terms of this Order. The Respondent must also present proof of successful substance abuse rehabilitation and she must demonstrate, to the satisfaction of the Board, that she poses no danger to the public or the practice of registered nursing and that she can safely and competently perform the duties of a licensed registered nurse.

B. Notwithstanding any provision above, the Respondent must continue to meet all Nursing 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.

AGREED TO:

Dated: 9·10·10

STATE OF VERMONT
SECRETARY OF STATE

By: _____ for
Edward G. Adrian
State Prosecuting Attorney

HOLLY JEAN WILLIAMS
RESPONDENT

Dated: 08·31·10

By: _____
Holly Jean Williams

APPROVED AS TO FORM:

Dated: 9/10/10

ATTORNEY FOR RESPONDENT

By: _____
John Pacht, Esq.

APPROVED AND SO ORDERED:

Dated: 9-13-10

VERMONT BOARD OF NURSING

By: _____
Chairperson

Date of Entry: September 14, 2010

nu.williams.stip2

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

IN RE:	)	
HOLLY JEAN WILLIAMS	)	Docket No. NU10-0708
License No. 026-0022002	)	

SPECIFICATION OF CHARGES

NOW COMES the State of Vermont and makes the following Charges against the Respondent, Holly Jean Williams, R.N.:

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 ("ARBN"); and the Rules of the Office of Professional Regulation.

Statement of Facts

2. Holly Jean Williams (the "Respondent") of South Burlington, Vermont is a registered nurse holding license number 026-0022002, issued by the State of Vermont. This license was originally issued on February 22, 1995 and is currently set to expire March 31, 2009.

3. At all relevant times the Respondent was employed at Fletcher Allen Health Care (the "Facility") located in Burlington, Vermont.

4. On or about July 16, 2008 the Office of Professional Regulation received a report from the Facility indicating that the Respondent was suspected of possible drug diversion due to Respondent appearing in the Facility's PYXIS machine (a drug dispensing system used by staff) as being one of the highest users of several medications, as well as Respondent withdrawing medications from the PYXIS for several patients who were not assigned to her, without documenting in those patients' Medication Administration Records ("MARs") that those medications had been administered to patients.

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controlled substances. The Facility was advised that the Respondent at that time indicated that there were times that she accidently brought home medications in her pockets.

6. On or about July 17, 2008 Investigator Greg Kelly interviewed nurse T.B. who expressed concern that the previous weekend, nurse M.C. had indicated that the Respondent was medicating one of M.C.'s patients. Based on this report, the Facility ran a 30 day review of the PYXIS records to determine whether the Respondent was medicating patients to whom she was not assigned. The Report, together with the medication administration records and the patient's flow sheets, indicate as follows:

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Hydromorphone 1mg ampule and documented .4 mg given for 7/10 pain at 1:02 PM. The Respondent withdrew the same amount at 7:45 PM and documented .4 given for 9/10 pain. L.F. was the patient of nurse N.S. at the time. The documented dose was double the .2 mg ordered. No waste was recorded. No other nurse gave pain medication in the surrounding 24 hours.

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that the Respondent was in a difficult place and that it did not make sense for her to participate in an interview.

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Charges

11. 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. 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);

b. 26 V.S.A. § 1582(a)(3) (Is unable to practice nursing competently by reason of any cause) which includes, but is not limited to, reasons of physical or mental disability or use of drugs, narcotics, chemicals, or any other type of materials pursuant to ARBN Chapter 4, Rule IV(II)(C); and

c. 26 V.S.A. § 1582(a)(7) (Engages in conduct of a character likely to deceive, defraud, or harm the public).

Relief Requested

WHEREFORE, the license of Holly Jean Williams should be revoked, suspended, reprimanded, conditioned , or otherwise disciplined.

DATED at Montpelier, Vermont this 22nd day of August, 2008.

STATE OF VERMONT
SECRETARY OF STATE

By: _____ for
Edward G. Adrian
State Prosecuting Attorney

STATE OF VERMONT

Prosecuting Attorney
Office of
Professional Regulation
9 Baldwin Street
Montpelier, VT
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nu.williams.soc

VERMONT SECRETARY OF STATE
OFFICE OF PROFESSIONAL REGULATION
BOARD OF NURSING

In re	Holly White	}
License No.	026-0031143	}
Docket No.	NU76[illegible]08	}

DEFAULT ORDER

Upon the filing of a "Notice of Hearing for Default Judgment" by the Secretary of State, the Vermont Board of Nursing (the "Board") heard this matter on Monday 11 August 2008 at the Secretary of State's Office of Professional Regulation, in the National Life Building at Montpelier, Vermont.

Findings of Fact

1. Respondent is subject to the regulatory authority of this Board. 3 V.S.A. §§ 129 and 129a; 26 V.S.A. Chapter 28; Administrative Rules for the Board of Nursing ("Nursing Rules") and the Administrative Rules for the Office of Professional Regulation ("OPR Rules").

2. The State filed a Specification of Charges dated 29 April 2008 ("charges"), which allege unprofessional conduct against the Respondent.

3. The Office of Professional Regulation served Respondent with notice of the charges via certified and first class mail at the address Respondent provided to OPR. Respondent is required to keep OPR and the Board informed of Respondent's current mailing address. 3 V.S.A. §129a (14).

4. The notice of charges contained instructions detailing the Respondent's legal obligation to answer the charges and explaining the consequences of failure to file a timely response. OPR also served a notice of this default hearing to the Respondent by certified mail.

5. The Respondent did not answer the charges within the legally prescribed time as required by OPR Rule 3.3 or at any time thereafter.

6. The Respondent did not appear for this default hearing.

7. Upon hearing the State's presentation and taking notice of its own file pursuant to 3 V.S.A. § 810(4), the Board finds the Respondent to be in default. The Board therefore treats the factual allegations contained in the State's specification of charges (copy attached) as proven, and those allegations will serve as the factual basis for the Board's order. OPR Rule 3.4; 3 V.S.A. § 809(d) and 3 V.S.A. § 814(c).

Conclusions of Law

8. The Respondent received adequate and legal notice of the charges as evidenced by the Board's file and the State's presentation of the case to the Board. Because the Respondent failed to answer the charges of unprofessional conduct, the Board finds the Respondent in default and will treat the State's factual allegations as established pursuant to OPR Rule 3.4.

9. The Board concludes, in this default hearing held pursuant to 3 V.S.A. § 809(d), that the Respondent has engaged in unprofessional conduct as alleged by the State of Vermont.

Order

In accordance with the above findings of fact and conclusions of law and effective the date of entry of this order, the Board of Nursing ORDERS that the Respondent's license be SUSPENDED INDEFINITELY.

- END -
(*signature page to follow*)

Vermont Board of Nursing:

By: Ellen W Leff
Ellen Leff, RN

Dated: Montpelier, Vermont 11 Aug. 2008

OFFICE OF PROFESSIONAL REGULATION

DATE OF ENTRY: 8/18/08

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 the decision by filing a written Notice of Appeal with the Director of the Office of Professional Regulation, Secretary of State's Office, National Life Building, FL2, 1 National Life Drive, Montpelier, Vermont 05602-3402 within 30 days of the entry of the order.

For more information about the procedure for filing an appeal, please see the Administrative Rules for the Office of Professional Regulation, which you can find at: http://www.vtprofessionals.org/opr1/opr/admnrule.pdf and the Rules are also available at the Office of Professional Regulation.

If you file an appeal, the Director of the Office of Professional Regulation shall assign the case to an appellate officer. The appellate officer will review the record (the tape recording, exhibits etc.) created before the board during the hearing of your case. In cases of alleged irregularities in procedure before the board, not shown in the record, proof related to that issue may be taken by the appellate officer. 3 V.S.A. §§ 129(d) and 130a.

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

IN RE: HOLLY JEAN WILLIAMS) DOCKET No. NU10-0708
License No. 026-0022002)

REQUEST FOR SUMMARY SUSPENSION

Board Authority

1. The Vermont Board of Nursing (the "Board") has jurisdiction to investigate and adjudicate allegations of unprofessional conduct committed by Nurses pursuant to 3 V.S.A. §§ 129, 129a; 26 V.S.A. Chapter 28 and; the rules of the Board and the Vermont Office of Professional Regulation.

2. The Board of Nursing is authorized by 3 V.S.A. § 814 to summarily suspend the license of a nurse when it finds that the public health, safety or welfare imperatively requires emergency action.

Statement of Facts

3. Holly Jean Williams (the "Respondent") of South Burlington, Vermont is a registered nurse holding license number 026-0022002, issued by the State of Vermont. This license is set to expire March 31, 2009.

4. At all relevant times the Respondent was employed at Fletcher Allen Health Care (the "Facility") located in Burlington, Vermont.

5. On or about July 21, 2008 the Office of Professional Regulation received a report from the Facility indicating that based on an initial investigation, the Respondent was suspected of possible drug diversion and had been put on paid leave pending a complete investigation.

6. The Facility had been concerned about the Respondent's activities since June, 2006 when a report was received from New York law enforcement authorities that the Respondent's boyfriend was in possession of a rental storage unit that had weapons, marijuana, chemicals used to produce crystal methamphetamine and various controlled substances. The Facility was advised that the Respondent at that time indicated that there were times that she accidently brought home medications in her pockets.

7. On or about July 17, 2008 Investigator Greg Kelly interviewed nurse T.B. who expressed concern that the previous weekend, nurse M.C. had indicated that the Respondent was medicating one of M.C.'s patients. Based on this report, the Facility ran a 30 day review of the PYXIS records to determine whether the Respondent was medicating patients to whom she was not assigned. The Report together with the

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medication administration records and the patient's flow sheets indicate as follows:

a. On or about June 15, 2008 the Respondent removed a Hydromorphone ampule 1mg/1ml at 10:15 AM from the PYXIS for patient E.P. who was the patient of nurse D.R. 0.8 mg was wasted and witnessed by nurse J.C. However, no dose was documented on the MAR and there was no pain documented by any assigned nurses in the 24 hour period.

b. On or about June 19, 2008 the Respondent removed two tabs of Oxycodone IR 5mg from the PYXIS for patient J.S. at 8:32 AM and again at 12:09 PM. J.S. was the patient of Nurse P.J. and P.J. had not documented any pain on the flow sheets. The Respondent did not document administration of the Oxycodone IR in the MAR.

c. On or about June 19, 2008 the Respondent withdrew Hydromorphone 1mg/1ml ampule for patient J.R. at 2:39 PM and again at 2:57 PM. P.J. was the nurse of J.R. and documented Dilaudid 1mg given at 2:35 PM. The second dose that was withdrawn from the PYXIS 18 minutes later was not documented anywhere.

d. On or about June 20, 2008 the Respondent withdrew 10 tablets of Morphine IR 15 mg at 3:00 PM for patient B.B. This was not documented in the MAR and B.B. was nurse S.D.'s patient, not the Respondent's.

e. On or about June 20, 2008 the Respondent withdrew a 10 mg Morphine ampule at 12:33 PM from the PYXIS for patient M.S who as assigned to nurse M.D. 9 mg was documented as wasted and witnessed by nurse J.N. at 3:47 PM. M.S. did not have an order for the Morphine. Nothing was documented on the MAR and the waste occurred over three hours after being withdrawn.

f. On or about July 11, 2008 the Respondent withdrew 2 tabs of Morphine IR 15mg for patient J.C. from the PYXIS at 9:53 AM and administered for 8/10 pain and 6:54 PM and administered for 7/10 pain. J.C. was assigned to nurse M.C. at the time who was not aware that the patient had been medicated or needed to be medicated.

g. On or about July 11, 2008 for patient L.F. the Respondent withdrew Hydromorphone 1mg ampule and documented .4 mg given for 7/10 pain at 1:02 PM. The Respondent withdrew the same amount at 7:45 PM and documented .4 given for 9/10 pain. L.F. was the patient of nurse N.S. at the time. The documented dose was double the .2 mg ordered. No waste was recorded. No other nurse gave pain medication in the surrounding 24 hours.

h. On or about July 12, 2008 for patient L.F. the Respondent withdrew Hydromorphone 1mg ampule and documented .4 mg given for 7/10 pain at 10:19 AM. The Respondent withdrew the same amount at 4:57 PM and

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Administrative Rules Chapter 4, Rule IV, II, C ("Any cause" includes, but is not limited to, reasons of physical or mental disability or use of drugs, narcotics, chemicals or any other type of materials); 26 V.S.A. § 1582(a)(7)(engages in conduct of a character likely to deceive, defraud or harm the public).

WHEREFORE, the State of Vermont respectfully requests that pursuant to 3 V.S.A. § 814(c), the Respondent's nursing license number be summarily suspended, pending a hearing on the merits.

DATED at Montpelier, Vermont this 7th day of August, 2008.

STATE OF VERMONT
SECRETARY OF STATE

By: _____
Edward G. Adrian
State Prosecuting Attorney

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Prosecuting Attorney
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VERMONT SECRETARY OF STATE
OFFICE OF PROFESSIONAL REGULATION
STATE BOARD OF NURSING

In re	Holly Jean Williams	}
License No.	026-0022002	}
Docket No.	NU10-0708	}

SUMMARY SUSPENSION ORDER

On Monday 11 August 2008, this matter came before the Vermont State Board of Nursing by petition of the State of Vermont. The State of Vermont seeks a summary suspension of Respondent's professional license pursuant to 3 V.S.A. § 814(c). The hearing took place at the Secretary of State's Office of Professional Regulation, National Life Building, Montpelier, Vermont.

The Board has authority to suspend summarily a license pending further proceedings if it determines that public health, safety or welfare imperatively require emergency action.

Findings of Fact &
Conclusions of Law:

Based on a review of the evidence presented at the hearing of this matter, the Board finds:

1. The Board of Nursing licenses the Respondent, and the Respondent is subject to the disciplinary authority of this Board. Title 26, Chapter 28; 3 V.S.A. § 129(a)(3); and the Administrative Rules of the Office of Professional Regulation.
2. The State filed a "Request for Summary Suspension" dated 7 August 2008, alleging that the Respondent is suspected of diverting controlled substances from her employer, Fletcher Allen Health Care, in June and July 2008.
3. The State argues that public health, safety or welfare imperatively requires emergency action, and it asks this Board to suspend summarily the Respondent's license prior to a full hearing on the merits.
4. The Board has considered the evidence related to the allegations in the State's Request for Summary Suspension.
5. The Board finds that the State has, in its presentation of evidence, met its burden to the necessary degree of showing an imperative need for emergency action to protect the public health, safety and welfare.
6. Pursuant to 3 V.S.A. § 814(c), the Board issues the following temporary order, which shall remain in effect until further action by this Board.

ORDER

The Board of Nursing GRANTS the State of Vermont's Request for Summary Suspension.

The Respondent's license is SUMMARILY SUSPENDED pending proceedings for revocation or other action. These proceedings shall be promptly instituted and determined.

- END -

Vermont Board of Nursing

By: Glen Wolff Dated at Montpelier: 11 August 2008

OFFICE OF PROFESSIONAL REGULATION

DATE OF ENTRY: 8/13/08

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

IN RE:	)	
HOLLY WHITE	)	**Docket No: NU76-0308**
License No. 026-0031143	)	

SPECIFICATION OF CHARGES

NOW COMES the State of Vermont and makes the following Charges against the Respondent, Holly White, R.N.:

Board Authority

1. The Vermont State Board of Nursing ("the Board") has authority to issue warnings or reprimands, suspend, revoke, limit, 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 ("ARBN"); and the Rules of the Office of Professional Regulation.

Statement of Facts

2. The Respondent, Holly White, is licensed in the State of Vermont as a licensed practical nurse under license number 026-0031143. This license was originally issued on or about May 25, 2005 and is currently set to expire on March 31, 2009.

3. At all times relevant, the Respondent was residing in the State of California.

4. In November, 2007 the Respondent self-reported to the Board of Nursing that she had a substance abuse issue. Around this time period the Respondent also tested positive for marijuana based on a required pre-employment test.

5. In January, 2008 the Respondent was offered the opportunity to participate in the Vermont Board of Nursing Alternative Program.

6. On or about March 21, 2008 the Respondent advised Investigator Mark Jacobs that she had been enrolled in a residential treatment facility called So Cal Sober Living and that she had been staying sober and clean of drugs. Facility personnel confirmed that the Respondent was participating and adhering to facility guidelines including mandatory meetings and drug testing. The Respondent was again offered the opportunity to participate in the Alternative Program. As of the date below, the Respondent has not indicated that she wishes to participate in the Alternative Program.

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Charges

7. The acts, omissions and/or circumstances described above constitute grounds for discipline because the Respondent has committed unprofessional conduct in violation of:

i. 26 V.S.A. § 1582(a)(3)(is unable to practice nursing competently by reason of any cause);
ii. Vermont Board of Nursing Administrative Rules Chapter 4, Rule IV, II, C ("Any cause" includes, but is not limited to, reasons of physical or mental disability or use of drugs, narcotics, chemicals or any other type of materials);
iii. 26 V.S.A. § 1582(a)(5) (Is addicted to the use of habit forming drugs); and
iv. 3 V.S.A. §129a(a)(3) (failing to comply with the provisions of state statutes or rules governing the practice of the profession).

Relief Requested

WHEREFORE, the license of Holly White should be revoked, suspended, reprimanded, conditioned or otherwise disciplined.

DATED at Montpelier, Vermont this 24th day of April, 2008.

STATE OF VERMONT
SECRETARY OF STATE

By: _____
Edward G. Adrian
State Prosecuting Attorney

nu.white.soc

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