

**STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING**

Angel Predzimirski, R.N.
License No. 137001

Petition No. 2020-1221

MEMORANDUM OF DECISION

I

Procedural Background

On June 10, 2021, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing. Board ("Bd.") Exhibit ("Ex.") 1. The Charges allege that Angel Predzimirski ("Respondent") violated Chapter 378 of the Connecticut General Statutes ("Conn. Gen. Stat."), subjecting her registered nurse ("R.N.") license number 137001 to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b) (4) and/or 20-99(b)(5). *Id.*

On June 10, 2021, the Department filed a Motion for Summary Suspension ("Motion") with the Board. Bd. Ex. 2. Based on the allegations in the Charges, and the affidavits and reports attached to the Motion, the Board found that Respondent's continued nursing practice presented a clear and immediate danger to public health and safety. Accordingly, on June 16, 2021, pursuant to Conn. Gen. Stat. §§ 4-182(c) and 19a-17(c), the Board ordered Respondent's registered nurse license number 137001 be summarily suspended pending a final determination by the Board of the allegations contained in the Charges ("Summary Suspension Order"). Bd. Ex. 3.

On June 18, 2021, the Department mailed the Summary Suspension Order, Charges, and Notice of Hearing ("Notice") to Respondent's email address of record on file with the Department at atpredzimirski@gmail.com. Bd. Ex. 4. The Notice informed the parties that a hearing was scheduled for July 21, 2021. *Id.*

The hearing convened on July 21, 2021, via video conference. Respondent was present at the hearing and was self-represented. Transcript ("Tr.") p. 3. Attorney Joelle Newton represented the Department. *Id.*

At the hearing, Respondent requested a continuance of the hearing in order to retain an attorney to represent her. Tr. p. 4. With no objection from the Department, the Board granted

Respondent a continuance. Tr. pp. 4-6. The Summary Suspension Order remained in effect. Tr. p. 5.

On August 25, 2021, the Board sent a Notice of Continuance to the Respondent and the Department informing that a rescheduled hearing would be held on October 20, 2021. Bd. Ex. 6. On October 20, 2021, the hearing reconvened. Respondent was present and was not represented by counsel. Tr. p. 3. Attorney Joelle Newton represented the Department. Tr. p. 4. Respondent orally answered the Charges on the record. Tr. pp. 6-8.

Following the close of the record, the Board conducted fact finding. Each member of the Board involved in this decision attests that he or she was present at the hearing, or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board's specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services*, 228 Conn. 651 (1994).

I

Allegations

1. In paragraph 1 of the Charges, the Department alleges that Respondent of Naugatuck, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number 137001.
2. In paragraph 2 of the Charges, the Department alleges that on multiple occasions from approximately 2020 through April 2021, Respondent abused or utilized alcohol, marijuana, cocaine, amphetamines, benzodiazepines and/or Adderall ("polysubstance abuse") to excess.
3. In paragraph 3 of the Charges, the Department alleges that from approximately 2020 through the present, Respondent has or had emotional disorders and/or mental illnesses ("diagnoses").
4. In paragraph 4 of the Charges, the Department alleges that Respondent's diagnoses and/or polysubstance abuse does, and/or may, affect her practice of nursing.
5. In paragraph 5 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b) including, but not limited to, 20-99(b) (4) and/or 20-99(b)(5).

III

Findings of Fact

1. Respondent, of Naugatuck, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number 137001. Tr. 10/20/2021, p. 7.
2. On multiple occasions from approximately 2020 through April 2021, Respondent abused or utilized alcohol to excess. Tr. 10/20/2021, pp. 11-13, 17 (under seal).
3. From approximately 2020 to the present, Respondent had or continues to have emotional disorders and/or mental illnesses. Tr. 10/20/2021, pp. 4-10, 14-17, 19-22, 28, 30-31 (under seal).
4. Respondent's diagnoses, and/or past polysubstance abuse, does, and/or may, affect her practice of nursing. Tr. 10/20/2021, pp. 14-17, 19-22, 28, 30-31 (under seal).
5. The record is insufficient to establish by a preponderance of the evidence that Respondent abused or utilized marijuana, cocaine, amphetamines, benzodiazepines and/or Adderall to excess during the period of 2020 through April 2021. Tr. 10/20/2021, pp. 8, 13-14 (under seal).

IV

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727, 739-740 (2013).

The Department sustained its burden of proof with regard to the allegations contained in the paragraphs 2, 3 and 4 of the Charges. With respect to the paragraph 2 of the Charges, the Department sustained its burden of proof as to the portion of the allegation pertaining to the use and/or abuse of alcohol to excess.

Conn. Gen. Stat. § 20-99 provides, in pertinent part,

- (a) The Board . . . shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons licensed to practice nursing. After holding a hearing . . . said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17. . . .
- (b) Conduct which fails to conform to the accepted standards of the nursing profession includes, but is not limited to, the following: . . . (4) emotional disorder or mental illness; (5) abuse or excessive use of drugs, including alcohol, narcotics or chemicals; . . .

Specifically, under Conn. Gen. Stat. § 20-99(b)(4) and 20-99(b) (5), a licensee whose conduct fails to conform to the accepted standards of the nursing profession which includes, but is not limited to, emotional disorder, mental illness, abuse, or excessive use of drugs, including alcohol, narcotics, or chemicals, may after a hearing, have his or her license revoked or suspended.

Respondent admitted to the allegations contained in paragraphs 1 and 3 of the Charges, but denied the allegations contained in paragraphs 2 and 4 of the Charges. Tr. 10/20/2021, pp. 7-8. Nonetheless, the Board finds that with respect to the allegations contained in the Charges, the Department sustained its burden of proof by a preponderance of the evidence with respect to all of the Charges, with the exception the allegations contained in paragraph 2 concerning use and/or excessive use of marijuana, cocaine, amphetamines, benzodiazepines and/or Adderall during the period of approximately 2020 through April 2021. Findings of Fact (“FF”) 1-5.

With respect to the allegations contained in paragraph 2 of the Charges, Respondent admitted that she has a history of polysubstance abuse but testified that such abuse occurred prior to the timeframe alleged in the Charges. Tr. 10/20/2021, pp. 10, 27 (under seal). Thus, the Board finds that the Department failed to establish by a preponderance of the evidence that Respondent’s polysubstance abuse took place on multiple occasions during the period of approximately 2020 through April 2021.

Respondent testified that in 2020 through April 2021, she was not actively using any of the polysubstances as alleged, except medical marijuana and alcohol. Tr. 10/20/2021, pp. 13-14 (under seal). However, Respondent admitted to the allegations contained in paragraph 2 in the Charges regarding excessive use or abuse of alcohol. Tr. 10/20/2021, p. 11 (under seal). On October 20, 2020, Respondent was diagnosed with active alcohol use disorder based on her score on an alcohol use assessment test. Dept. Ex. 2, pp. 12-13 (under seal).

Respondent testified that in October 2020, she drank alcohol with dinner after abstaining from alcohol for a period of time. Tr. 10/20/2021, pp. 11-12 (under seal). Respondent testified that she knew she had made a “poor decision” when she gave herself permission to have a few drinks that night. Tr. 10/20/2021, p. 12 (under seal). During her testimony, Respondent acknowledged that “once you’re an alcoholic, you’re an alcoholic,” even when not actively using. Tr. 10/20/2021, p. 13 (under seal). Respondent admitted that in January 2021 and again

in March 2021, she abused alcohol and tested positive for the same. Tr. 10/20/2021, p. 17 (under seal).

Respondent further testified, and the documentary evidence establishes, that she uses medical marijuana as prescribed. Tr. 10/20/2021, pp. 14-15 (under seal); Dept. Ex. 2, pp. 6, 10, 17-18 (under seal). Although Respondent is aware of the risk of dependence on, and withdrawal symptoms from, cannabis, she remains ambivalent about ceasing the use of cannabis because she claims it helps her control her feelings of anxiety and her cravings for alcohol. Dept. Ex. 1, p. 2 (under seal); Dept. Ex. 2, pp. 17-18 (under seal); Dept. Ex. 3, pp. 20, 27, 33, 38, 52 (under seal).

Since October 2020, Respondent has continued outpatient therapy, with the frequency of visits as she and her therapist deem appropriate, and she is currently taking prescribed medication for depression. Tr. 10/20/2021, pp. 8-9, 15-18 (under seal)

The allegations contained in paragraph 3 of the Charges are not in dispute. With respect to such allegations, the record establishes that in 2015, 2017, and 2020, Respondent experienced episodes of mental illness that required hospitalization. Dept. Ex. 1, p. 2 (under seal); Tr. 10/20/2021, pp. 5-6, 8-9.

Respondent testified that she has consistently been in counseling with the same therapist, with weekly or monthly sessions, from February 2021 to the present. Tr. 10/20/2021, pp. 23-25 (under seal). Respondent also testified that she is undergoing weekly random urine screens. Tr. 10/20/21, pp. 25-27. Respondent testified that all of her urine screens have been negative for all drugs except marijuana, for which she has a medical prescription certified by the State of CT. Tr. 10/20/2021, pp. 25-27 (under seal). Based on the Respondent's testimony and the documentary evidence, the Board finds that the Department established by a preponderance of the evidence that from 2020 to the present Respondent has had or has emotional disorders and/or mental illnesses.

Regarding the allegations contained in paragraph 4 of the Charges, the Department sustained its burden of proof that Respondent's polysubstance abuse, even if she is not currently using these substances, and mental and/or emotional disorders may affect her practice of nursing.

Respondent admitted that she has a long history, dating back to when she was 17 years old, of using and/or abusing alcohol, controlled substances, and certain illicit drugs. Dept. Ex. 1, p. 2 (under seal). In carrying out her nursing duties, Respondent's use and/or abuse of alcohol could impair her ability to make rational, accurate, and appropriate assessments, judgments, and

decisions regarding patient care, thereby impacting the safety of patients and placing them in potential danger. Dept. Ex. 1, p. 2 (under seal); Dept. Ex. 2, pp. 4-6, 11, 16 (under seal).

Respondent testified that she is no longer using any controlled substances except certain prescribed antidepressants and medical marijuana. Respondent's therapist's reports and drug screen reports document Respondent's current sobriety. Tr. 10/20/2021, pp. 12-16 (under seal).

The conduct admitted, in conjunction with the Department sustaining its burden of proof, renders Respondent's license subject to sanctions including, among others, revocation, suspension, or probation. *See*, Conn. Gen. Stat. § 19a-17(a) (1), (2) and (5). Nonetheless, based on the totality of the evidence, and Respondent's credible testimony concerning her improved mental health and on-going sobriety, her consistent participation in individual psychotherapy and psychotropic medication management (Tr. 10/20/2021, pp. 33-34 (under seal); Dept. Ex. 2, p. 18 (under seal)), her willingness to participate in random observed urine screen testing and attend AA meetings and other support groups (Tr. 10/20/2021, pp. 34-35 (under seal)), the Board finds that Respondent can practice nursing with reasonable skill and safety under the terms of this Order.

Order

Based on the record in this case, the above findings of fact, and conclusions of law, the Board hereby orders, with respect to Respondent's R.N. license number 137001, as follows:

1. Respondent's license number 137001 to practice as a registered nurse in the State of Connecticut is hereby reprimanded.
2. Respondent's license shall be placed on probation for a period of four years under the following terms and conditions. If any of the conditions of probation are not met, Respondent's R.N. license may be subject to disciplinary action pursuant to Conn. Gen. Stat. § 19a-17.
3. Respondent's license number 137001 to practice as a registered nurse in the State of Connecticut is hereby reprimanded.
 - A. During the period of probation, the Department shall pre-approve Respondent's employment and/or change of employment within the nursing profession.
 - B. Respondent shall not be employed as a nurse for a personnel provider service, assisted living services agency, homemaker-home health aide agency, or home

health care agency, and shall not be self-employed as a nurse during the probationary period.

- C. Respondent shall provide a copy of this Decision to any and all employers if employed as a nurse during the probationary period. The Department shall be notified in writing by any employer(s), within 30 days of the commencement of employment, as to receipt of a copy of this Decision.
- D. Respondent shall not administer, count, or have access to controlled substances, or have responsibility for such activities in the course of nursing duties during the first year of working as a nurse during the probationary period.
- E. If employed as a nurse, Respondent shall cause employer reports to be submitted to the Department by her immediate supervisor during the entire probationary period. Employer reports shall be submitted commencing with the report due on the first business day of the month following employment as a nurse. Employer reports shall be submitted at least monthly for the first and fourth years of the probationary period and, at least quarterly for the second and third years of the probationary period.
- F. The employer reports cited in Paragraph E above shall include documentation of Respondent's ability to practice nursing safely and competently. Employer reports shall be submitted directly to the Department at the address cited in Paragraph Q below.
- G. Should Respondent's employment as a nurse be involuntarily terminated or suspended, Respondent and her employer shall notify the Department within 72 hours of such termination or suspension.
- H. If Respondent pursues further training in any subject area that is regulated by the Department, Respondent shall provide a copy of this Decision to the educational institution or, if not an institution, to Respondent's instructor. Such institution or instructor shall notify the Department in writing as to receipt of a copy of this Decision within 15 days of receipt. Said notification shall be submitted directly to the Department at the address cited in Paragraph Q below.
- I. At her expense, Respondent shall engage in therapy and counseling for chemical dependency with a licensed or certified therapist, approved by the Department,

during the entire probationary period. Additionally, Respondent shall participate in AA substance abuse support groups at least eight to ten times per month for the entire probationary period and shall submit to the Department written documentation of her participation and/or attendance.

- J. Respondent shall provide a copy of this Decision to her therapist. The Department shall be notified in writing by her therapist, within 30 days of the effective date of this Decision, as to receipt of a copy of this Decision.
- K. Respondent shall cause evaluation reports to be submitted to the Department by her therapist during the entire probationary period. Therapist reports shall be submitted at least monthly for the first and fourth years of the probationary period and, at least quarterly for the second and third years of the probationary period.
- L. The therapist reports cited in Paragraph K above shall include documentation of dates of treatment and an evaluation of Respondent's progress, including alcohol and drug free status, and ability to practice nursing safely and competently. Therapist reports shall be submitted directly to the Department at the address cited in Paragraph Q below.
- M. Observed random urine screens
 - (1) At her expense, Respondent shall be responsible for submitting to observed, random chain of custody urine screens for alcohol and drugs for the entire probationary period at a testing facility approved by the Department. Random alcohol/drug screens shall be legally defensible in that specimen donor and chain of custody can be identified throughout the screening process.
 - (2) Respondent shall be responsible for notifying the laboratory, her therapist, the Department and her prescribing practitioner of any drug(s) she is taking. For any prescription of a controlled substance(s) for more than two consecutive weeks, Respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department until such time as the controlled substance(s) are no longer prescribed.

The reports shall include the following:

- a. A list of controlled substances prescribed by this provider;
- b. A list of controlled substance(s) prescribed by other providers;
- c. An evaluation of Respondent's need for the controlled substance(s); and
- d. An assessment of Respondent's continued need for the controlled substance(s).

- (3) There must be at least one such observed, random alcohol/drug screen on a weekly basis during the first and fourth years of the probationary period and at least twice a month during the second and third years of the probationary period.
- (4) Random alcohol/drug screens shall be negative for the presence of alcohol and drugs, excluding the drugs that Respondent's providers prescribe. All urine screens for alcohol will be tested for Ethyl Glucuronide (EtG) and Ethyl Sulfate (EtS) metabolites. All positive screen results shall be confirmed by the Gas Chromatograph Mass Spectrometer (GC/MS) testing method. Chain of custody documentation must accompany all laboratory reports and/or the laboratory reports must indicate that chain of custody procedures have been followed.
- (5) Random alcohol/drug screens must include testing for the following substances:

Amphetamines	Methadone
Barbiturates	Methaqualone
Benzodiazepines	Opiates (Metabolites)
Cannabinoids (THC Metabolites)	Phencyclidine (PCP)
Cocaine	Propoxyphene
Meperidine (Demerol)	Ethanol (alcohol)
Fentanyl	Stadol
Tramadol	

- (6) Laboratory reports of random alcohol and drug screens shall be submitted directly to the Department, at the address cited in Paragraph Q below, by Respondent's therapist, personal physician, or the testing laboratory.

N. Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate purpose by a licensed health care

practitioner authorized to prescribe medications. Respondent shall not abuse and/or excessively use any drugs that are prescribed for a legitimate medical purpose.

- O. Respondent is hereby advised that the ingestion of poppy seeds may produce a positive drug screen result indicating the presence of opiates/morphine. The ingestion of mouthwash, over the counter cough suppressants and cold/flu remedies may produce a positive result indicating the presence of alcohol. For that reason, any food substance containing poppy seeds, mouthwash, and over the counter cough suppressants and cold/flu remedies should be avoided during the probationary period. In the event that a drug/alcohol screen is positive for opiates/morphine and/or alcohol, the ingestion of poppy seeds, mouthwash, and over the counter cough suppressants and/or cold/flu remedies shall not constitute a defense to such positive screen.
- P. The Department must be informed in writing prior to any change of address.
- Q. All communications, payments, if required, correspondence, and reports are to be addressed to:

Practitioner Monitoring and Compliance Unit
Department of Public Health
Division of Health Systems Regulation
410 Capitol Avenue, MS #12HSR
P. O. Box 340308
Hartford, CT 06134-0308

- 3. Any deviation from the terms of probation, without prior written approval by the Board, shall constitute a violation of probation which will be cause for an immediate hearing on charges of violating this Order. Any finding that Respondent has violated this Order will subject Respondent to sanctions under Conn. Gen. Stat. §§ 19a-17(a) and (c) including, but not limited to, the revocation of her license. Any extension of time or grace period for reporting granted by the Board shall not be a waiver, or preclude the Board's right, to take subsequent action. The Board shall not be required to grant future extensions of time or grace periods. Notice of revocation or other disciplinary action shall be sent to Respondent's address of record which is deemed to be the most current address reported

by Respondent to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.

4. This document has no bearing on any criminal liability without the written consent of the Director of Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.

This Order is effective on the date it is signed by the Board.

The Board hereby informs Respondent, Angel Predzimirski, and the Department of this decision.

Dated at _____ Connecticut this _____ day of May 2022.

BOARD OF EXAMINERS FOR NURSING

By _____
Patricia C. Bouffard, D.N.Sc., Chair

4. The Department respectfully requests that the clerical error in paragraph 1B, on page 7 of the attached Memorandum of Decision dated April 6, 2022 be corrected to eliminate the phrase “the first year of,” as the Board intended that respondent would not be self-employed as a nurse or be employed as a nurse for a personnel provider service, assisted living services agency, homemaker-home health aide agency or home health care agency for the entirety of the probationary period.

Respectfully submitted,

THE DEPARTMENT OF PUBLIC HEALTH

/s/ Linda L. Fazzina

Linda L. Fazzina, Staff Attorney
Office of Legal Compliance

ORDER

The Department of Public Health’s Motion for Modification of Final Decision having been duly considered by the Board of Examiners for Nursing is hereby GRANTED/ DENIED.

Dated this _____ day of _____ 2022 at _____,
Connecticut. .

Board of Examiners for Nursing

CERTIFICATION

I certify that on this 13th day of April, 2022, a copy of the foregoing was sent to respondent via email(tricia84rn@gmail.com) and to the Department’s Public Health Hearing Office (ppho.DPH@ct.gov).

/s/ Linda L. Fazzina

Linda L. Fazzina, Staff Attorney
Office of Legal Compliance

**STATE OF CONNECTICUT
BOARD OF EXAMINERS FOR NURSING**

Patricia Fryer, R.N.
License No. 079638

Petition No. 2021-572

MEMORANDUM OF DECISION

I

Procedural Background

On July 16, 2021, the Department of Public Health ("Department") filed a Statement of Charges ("Charges") with the Board of Examiners for Nursing ("Board"). Board ("Bd.") Exhibit ("Ex.") 1. The Charges allege that Patricia Fryer ("Respondent") violated Chapter 378 of the Connecticut General Statutes ("Conn. Gen. Stat."), subjecting Respondent's registered nurse ("R.N.") license number 079638 to disciplinary action pursuant to Conn. Gen. Stat. §§ 19a-17 and 20-99(b), including, but not limited to, § 20-99(b)(5).

On July 16, 2021, the Department filed a Motion for Summary Suspension ("Motion") with the Board. Bd. Ex. 2.

Based on the allegations in the Charges, and the affidavits and reports attached to the Motion, the Board found that Respondent's continued nursing practice presented a clear and immediate danger to public health and safety. On July 21, 2021, the Board granted the Department's Motion. Accordingly, pursuant to Conn. Gen. Stat. §§ 4-182(c) and 19a-17(c), the Board ordered that Respondent's R.N. license be summarily suspended pending a final determination by the Board of the allegations contained in the Charges ("Summary Suspension Order"). Bd. Ex. 3.

On July 22, 2021, the Summary Suspension Order, Charges, and Notice of Hearing ("Notice"), were sent by first class mail to 156 Fitch Street, New Haven, CT 06515, Respondent's address of record on file with the Department. On the same date, the Summary Suspension Order, Charges and Notice were emailed to Respondent at tricia84@gmail.com.

The hearing was held on August 11, 2021. Respondent appeared at the hearing and was not represented by an attorney. Attorney Linda Fazzina represented the Department. During the hearing, Respondent testified that tricia84@gmail.com was not her correct email address. Respondent testified that her correct email address is tricia84RN@gmail.com. The

printout from the licensee database was corrected, marked for identification, and entered into the record as a full exhibit. Bd. Ex. 5; Transcript (“Tr.”) pp. 4-5.

At the hearing, Respondent orally answered the Charges on the record. Transcript (“Tr.”) pp. 10-13.

Following the close of the record, the Board conducted fact finding.

Each member of the Board involved in this decision attests that he or she was present at the hearing, or has reviewed the record, and that this decision is based entirely on the record, the law, and the Board’s specialized professional knowledge in evaluating the evidence. *Pet v. Department of Health Services*, 228 Conn. 651 (1994).

II

Allegations

Count One

1. In paragraph 1 of the Charges, the Department alleges that Respondent of New Haven, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number 079638.
2. In paragraph 2 of the Charges, the Department alleges that on or about May 25, 2021, Respondent abused and/or utilized cannabis or marijuana in excess.
3. In paragraph 3 of the Charges, the Department alleges that on or about June 29, 2021, Respondent abused and/or utilized alcohol to excess.
4. In paragraph 4 of the Charges, the Department alleges that Respondent’s abuse and/or excessive use of cannabis, marijuana and/or alcohol does, and/or may, affect her practice as a nurse.
5. In paragraph 5 of the Charges, the Department alleges that the above facts constitute grounds for disciplinary action authorized by Conn. Gen. Stat. §§ 20-99(b) including, but not limited to, 20-99(b)(5).

Count Two

6. In paragraph 6 of the Charges, the Department incorporates herein by reference paragraph 1 of the Charges as if set forth in full.
7. In paragraph 7 of the Charges, the Department alleges that on October 16, 2019, the Board ordered a Consent Order in Petition No. 2019-760 (“the Consent Order”) that placed Respondent’s nursing license on probation for a period of four (4) years. Such disciplinary action was based on Respondent’s admitted abuse or excessive use of marijuana and cocaine.

8. In paragraph 8 of the Charges, the Department alleges that the Consent Order required, in part, that Respondent shall not obtain or use controlled substance unless prescribed for a legitimate therapeutic purpose by a licensed health care professional and that all urine screens be negative for the presence of drugs and alcohol.
9. In paragraph 9 of the Charges, the Department alleges that on or about May 30, 2021, Respondent tested positive for cannabinoid and/or marijuana.
10. In paragraph 10 of the Charges, the Department alleges that on or about July 7, 2021, Respondent test positive for ethanol and/or alcohol.
11. In paragraph 11 of the Charges, the Department alleges that Respondent's conduct as described above constitutes violations of the terms of probation as set forth in the Consent Order and subjects her nursing license to revocation or other disciplinary action authorized by Conn. Gen. Stat. §§ 19a-17 and 20-99(b).

III

Findings of Fact

Counts One and Two

1. Respondent, of New Haven, Connecticut is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number 079638. Tr. p. 11.
2. On October 16, 2019, the Board issued a Consent Order in Petition No. 2019-760 ("Consent Order") that placed Respondent's nursing license on probation for a period of four years. Such disciplinary action was based on Respondent's admitted abuse or excessive use of marijuana and cocaine. Tr. p. 12; Department ("Dept.") Ex. 1, pp. 5-19.
3. The Consent Order required, in part, that Respondent shall not obtain or use controlled substance, unless prescribed for a legitimate therapeutic purpose by a licensed health care professional, and that all urine screens be negative for the presence of drugs and alcohol. Tr. p. 12; Dept. Ex. 1, pp. 3, 7-9 (under seal).
4. On or about May 25, 2021, Respondent abused and/or utilized cannabis or marijuana in excess. Dept. Ex. 1, pp. 1, 22 (under seal).
5. On or about May 30, 2021, Respondent tested positive for cannabinoid and/or marijuana. Tr. p. 12; Dept. Ex. 1, pp. 1, 3 (under seal).
6. On or about June 29, 2021, Respondent abused and/or utilized alcohol to excess. Dept. Ex. 1, p. 1 (under seal).
7. On or about July 7, 2021, Respondent tested positive for ethanol and/or alcohol. Tr. pp. 12-13; Dept. Ex. 1, p. 1-2, 4 (under seal).

8. Respondent's abuse and/or excessive use of cannabis, marijuana, and/or alcohol does, and/or may, affect her practice as a nurse. Tr. p. 11; Dept. Ex. 1, pp. 1-4 (under seal).

V

Discussion and Conclusions of Law

The Department bears the burden of proof by a preponderance of the evidence in this matter. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727, 739-740 (2013). The Department sustained its burden of proof with regard to all of the allegations contained in the Charges.

Conn. Gen. Stat. § 20-99 provides, in pertinent part,

(a) The Board . . . shall have jurisdiction to hear all charges of conduct which fails to conform to the accepted standards of the nursing profession brought against persons licensed to practice nursing. After holding a hearing . . . said board, if it finds such person to be guilty, may revoke or suspend his or her license or take any of the actions set forth in section 19a-17. . . .

(b) Conduct which fails to conform to the accepted standards of the nursing profession includes, but is not limited to, the following: . . . (5) abuse or excessive use of drugs, including alcohol, narcotics, or chemicals; . . .

With respect to the allegations contained in the Charges, Respondent admitted to all of the allegations contained in the Charges, except the allegations contained in paragraphs 2 and 3 of the Charges. However, the Board finds that the Department established by a preponderance of the evidence that on May 25, 2021, Respondent abused and/or used cannabis or marijuana and on May 30, 2021, Respondent tested positive for cannabinoid and/or marijuana. The Board also finds that the Department established by a preponderance of the evidence that on June 29, 2021, Respondent abused and/or used alcohol to excess and on July 7, 2021, Respondent tested positive for ethanol and alcohol. Findings of Fact ("FF") 4-7.

With respect to paragraphs 1 and 6 of the Charges, Respondent, of New Haven, Connecticut, is, and has been at all times, as referenced in the Charges, the holder of Connecticut R.N. license number 079638. FF 1.

With respect to the allegations contained in paragraph 2 and 9 of the Charges, the record establishes that on May 25, 2021, Respondent abused and/or utilized cannabis or marijuana to excess (FF 4) and on May 30, 2021, Respondent tested positive for cannabinoid and/or marijuana. FF 5.

With respect to the allegations contained in paragraphs 3 and 10 of the Charges, the record establishes that on June 29, 2021, Respondent abused and/or utilized alcohol to excess

(FF 6) and on July 7, 2021, the record establishes, and Respondent admits, that she tested positive for alcohol. FF 7.

With respect to the allegations contained in paragraphs 7 and 8 of the Charges, the record establishes, and Respondent admits, that on October 16, 2019, the Board issued a Consent Order in Petition No. 2019-760 that placed Respondent's nursing license on probation for a period of four years. Such disciplinary action was based on Respondent's admitted abuse or excessive use of marijuana and cocaine. FF 2. The record also establishes, and Respondent admits, that the Consent Order required, in part, that Respondent not obtain or use a controlled substance unless prescribed for a legitimate therapeutic purpose by a licensed health care professional. FF 3. The record also establishes, and Respondent admits, that the Consent Order further required Respondent to submit to random urine screens and that all such urine screens be negative for the presence of drugs and alcohol. FF 3.

With respect to the allegations contained in paragraph 4 of the Charges, the Department established by a preponderance of the evidence that Respondent's abuse and/or excessive use of cannabis, marijuana, and/or alcohol does, and/or may affect her practice as a nurse. FF 1-8.

In her testimony, Respondent initially denied that she abused cannabis or marijuana, despite her positive tests for cannabis and/or marijuana on May 25, 2021, and May 30, 2021. In her written statement to the Department monitor, she stated that, "she had no idea how it was positive." Dept. Ex. 1, pp. 1, 3, 28, 32 (under seal). Subsequently, Respondent conceded that although she is currently certified to obtain medical marijuana for her rheumatoid arthritis (Tr. p. 7 (under seal)); (Respondent Ex. C), she tested positive for marijuana *before* she received such certification. Tr. pp. 17, 21. Respondent also admitted that such positive drug tests violated the Consent Order provisions which prohibit the use of controlled substances without a prescription. *See*, paragraphs 3B and 3B(5) of the 2019 Consent Order. Dept. Ex. 1, pp. 1, 7-9 (under seal).

The record further establishes that Respondent's June 29, 2021, and July 7, 2021, positive urine screens for alcohol are irrefutable. Respondent suggested in her written statements to the Department monitor (Dept. Ex. 1, pp. 2, 4, 30, 40, 45 (under seal)) that the positive alcohol tests resulted from her use of mouthwash for a tooth infection. *Id.* Respondent also questioned the validity of the laboratory reports, suggesting that laboratory errors may have been responsible for her positive alcohol tests. Dept. Ex. 1, pp. 1, 3 (under seal).

Respondent further suggested, as documented in the Department's investigative report, that her diabetes might have been a contributing factor for the positive alcohol screen. Dept.

Ex. 1, p. 2. (under seal). However, further laboratory testing confirmed that Respondent had ingested alcohol within 8 hours of her test (Dept. Ex. 1, pp. 29-30 (under seal)) and, if used appropriately, mouthwash containing alcohol would not have caused a positive urine screen (Dept. Ex. 1, p. 4 (under seal)), unless Respondent ingested the mouthwash. *Id.* Moreover, the ingestion of mouthwash containing alcohol is not a defense to a positive screen for alcohol. Dept. Ex. 1, p. 9. Furthermore, as regards the Respondent's suggestion that her diabetes may have contributed to the positive alcohol screen, an elevated hemoglobin test had no bearing on the positive screen for alcohol. Dept. Ex. 1, pp. 2, 4, 30 (under seal).

Therefore, the Department established by a preponderance of the evidence that neither Respondent's written statements nor her testimony were credible explanations for her positive marijuana and alcohol tests. Such positive alcohol tests also violated the same provisions of the Consent Order. *See*, paragraphs 3B and 3B(5) of the 2019 Consent Order. Dept. Ex. 1, pp. 1, 7-9 (under seal).

Thus, despite Respondent's denials of the allegations in the Charges, the Department established by a preponderance of the evidence that Respondent's use and/or excessive use of cannabis and/or cannabinoid, marijuana, ethanol and/or alcohol does, and/or may, affect her practice of nursing.

The record establishes that Respondent's May 25, May 30, June 29, and July 7, 2021, use or abuse of cannabis and/or marijuana, and/or alcohol constitute a violation of the October 16, 2019, Consent Order and Conn. Gen. Stat. § 20-99(b)(5), which prohibits the "abuse or excessive use of drugs, including alcohol, narcotics, or chemicals." The conduct admitted, in conjunction with the Department sustaining its burden of proof, renders Respondent's R.N. license subject to sanctions, including, among others, revocation, suspension, or probation. *See*, Conn. Gen. Stat. §§ 19a-17(a)(1), (2) and (5). Nonetheless, based on the totality of the evidence, and reports from Respondent's alcohol and drug counselor representing that Respondent is making "good progress" in her treatment (Dept. Ex. 1, p. 4, under seal), the Board finds that Respondent can practice nursing with reasonable skill and safety under the terms of this Order.

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V
Order

Based on the record in this case, the above findings of fact, and conclusions of law, and pursuant to the authority vested in it by Conn. Gen. Stat. §§ 19a-17(a)(1), (2) and (5) and 20-99(b)(5), the Board finds that the conduct in Counts One and Two are severable and each Count as alleged and proven warrants the disciplinary action imposed by this Order. Therefore, the Board hereby issues the following orders with respect to Respondent's R.N. license number 079638:

1. Respondent's license shall be on probation for four years. This Order replaces the October 16, 2019, Consent Order in Petition No. 2019-760 in its entirety. Respondent's license will be subject to the terms and conditions listed below. If any of the conditions of probation are not met, Respondent's R.N. license may be subject to disciplinary action pursuant to Conn. Gen. Stat. § 19a-17.
 - A. During the probationary period, the Department shall pre-approve Respondent's employment and/or change of employment within the nursing profession.
 - B. Respondent shall not be employed as a nurse for a personnel provider service, assisted living services agency, homemaker-home health aide agency, or home health care agency, and shall not be self-employed as a nurse for the first year of the probationary period.
 - C. Respondent shall provide a copy of this Decision to any and all employers if employed as a nurse during the probationary period. The Department shall be notified in writing by any employer(s), within 30 days of the commencement of employment, as to receipt of a copy of this Decision.
 - D. If employed as a nurse, Respondent shall cause employer reports to be submitted to the Department by her immediate supervisor during the entire probationary period. Employer reports shall be submitted commencing with the report due on the first business day of month following employment as a nurse. Employer reports shall be submitted monthly during the first and fourth years of probation, and quarterly during the second and third years of probation.

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- E. The employer reports cited in Paragraph D above shall include documentation of Respondent's ability to practice nursing safely and competently. Employer reports shall be submitted directly to the Department at the address cited in Paragraph Q below.
- F. If Respondent's employment as a nurse is involuntarily terminated or suspended, Respondent and her employer shall notify the Department within 72 hours of such termination or suspension.
- G. If Respondent pursues further training in any subject area that is regulated by the Department, Respondent shall provide a copy of this Decision to the educational institution or, if not an institution, to Respondent's instructor. Such institution or instructor shall notify the Department in writing as to receipt of a copy of this Decision within 15 days of receipt. Said notification shall be submitted directly to the Department at the address cited in Paragraph Q below.
- H. At her expense, Respondent shall engage in therapy and counseling for chemical dependency with a licensed or certified therapist, approved by the Department, during the entire probationary period.
- I. Respondent shall provide a copy of this Decision to her therapist. The Department shall be notified in writing by her therapist, within 30 days of the effective date of this Decision, as to receipt of a copy of this Decision.
- J. Respondent shall cause evaluation reports to be submitted to the Department by her therapist during the entire probationary period. Therapist reports shall be submitted monthly during the first and fourth years of probation and quarterly during the second and third years of probation.
- K. The therapist reports cited in Paragraph J above shall include documentation of dates of treatment and an evaluation of Respondent's progress, including alcohol and drug free status and ability to practice nursing safely and competently. Therapist reports shall be submitted directly to the Department at the address cited in Paragraph Q below.
- L. Attendance in "anonymous" or non-anonymous support group meetings for 8 to 10 times per month.

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M. Observed random urine screens

- (1) At her expense, Respondent shall be responsible for submitting to observed, random chain of custody urine screens for alcohol and drugs for the entire probationary period at a testing facility approved by the Department. Random alcohol/drug screens shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening process.
- (2) Respondent shall be responsible for notifying the laboratory, her therapist, the Department, and her prescribing practitioner of any drug(s) she is taking. For any prescription of a controlled substance(s) for more than two consecutive weeks, Respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department until such time as the controlled substance(s) are no longer prescribed. The reports shall include the following:
 - a. A list of controlled substances prescribed by this provider;
 - b. A list of controlled substance(s) prescribed by other providers;
 - c. An evaluation of Respondent's need for the controlled substances; and
 - d. An assessment of Respondent's continued need for the controlled substance(s).
- (3) There must be at least one such random alcohol/drug screen per week during the first and fourth years of the probationary period and at least two such random alcohol/drug screens per month during the second and third years of the probationary period.
- (4) Random alcohol/drug screens shall be negative for the presence of alcohol and drugs, excluding the drugs that Respondent's providers prescribe. All urine screens for alcohol will be tested for Ethyl Glucuronide (EtG) and Ethyl Sulfate (EtS) metabolites. All positive screen results shall be confirmed by the Gas Chromatograph Mass Spectrometer (GC/MS) testing method. Chain of custody documentation must accompany all laboratory reports and/or the laboratory reports must indicate that chain of custody procedures have been followed.

- (5) Random alcohol/drug screens must include testing for the following substances:

Amphetamines	Methadone
Barbiturates	Methaqualone
Benzodiazepines	Opiates (Metabolites)
Cannabinoids (THC Metabolites)	Phencyclidine (PCP)
Cocaine	Propoxyphene
Meperidine (Demerol)	Ethanol (alcohol)
Fentanyl	Stadol
Tramadol	

- (6) Laboratory reports of random alcohol and drug screens shall be submitted directly to the Department at the address cited in Paragraph Q below by Respondent's therapist, personal physician, or the testing laboratory.
- N. Respondent shall not obtain for personal use and/or use alcohol or any drug that has not been prescribed for her for a legitimate purpose by a licensed health care practitioner authorized to prescribe medications. Respondent shall not abuse and/or excessively use any drugs that are prescribed for a legitimate medical purpose.
- O. Respondent is hereby advised that the ingestion of poppy seeds may produce a positive drug screen result indicating the presence of opiates/morphine. The ingestion of mouthwash, over the counter cough suppressants and cold/flu remedies may produce a positive result indicating the presence of alcohol. For that reason, any food substance containing poppy seeds, mouthwash, and over the counter cough suppressants and cold/flu remedies should be avoided during the probationary period. In the event that a drug/alcohol screen is positive for opiates/morphine and/or alcohol, the ingestion of poppy seeds, mouthwash, and over the counter cough suppressants and/or cold/flu remedies shall not constitute a defense to such positive screen.
- P. The Department must be informed in writing prior to any change of address.

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Q. All communications, payments if required, correspondence, and reports are to be addressed to:

Attn: Compliance Monitor
Practitioner Monitoring and Compliance Unit
Department of Public Health
Division of Health Systems Regulation
410 Capitol Avenue, MS #12HSR
P. O. Box 340308
Hartford, CT 06134-0308

2. Any deviation from the terms of probation, without prior written approval by the Board, shall constitute a violation of probation which will be cause for an immediate hearing on charges of violating this Order. Any finding that Respondent has violated this Order will subject Respondent to sanctions under Conn. Gen. Stat. §§ 19a-17(a) and (c), including, but not limited to, the revocation of her license. Any extension of time or grace period for reporting granted by the Board shall not be a waiver of or preclude the Board's right to take subsequent action. The Board shall not be required to grant future extensions of time or grace periods. Notice of revocation or other disciplinary action shall be sent to Respondent's address of record which is deemed to be the most current address reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.
3. This document has no bearing on any criminal liability without the written consent of the Director of Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.

This Order is effective on the date it is signed by the Board.

The Board hereby informs Respondent, Patricia Fryer, and the Department of this decision.

Dated at Waterbury, Connecticut this 6th day of April 2022.

BOARD OF EXAMINERS FOR NURSING

By Patricia C. Bouffard, D.N.S.
Patricia C. Bouffard, D.N.S., Chair

CERTIFICATION

I hereby certify that, pursuant to Connecticut General Statutes § 4-180(c), a copy of the foregoing Memorandum of Decision was sent this 7th day of April 2022, by email and certified mail, return receipt requested to:

Patricia Fryer, RN
156 Fitch Street
New Haven, CT 06515

VIA EMAIL (tricia84m@gmail.com)
and Certified Mail **9489 0090 0027 6312 5625 39**

and via email to:

Christian Andresen, Section Chief
Department of Public Health
410 Capitol Avenue, MS #12LEG
Hartford, CT 06134-0308

VIA EMAIL ONLY

Gina Johnson

Gina Johnson
Secretary 2
Department of Public Health
Public Health Hearing Office

SUMMARY SUSPENSION COVER SHEET

In re: Lynn Dougan, R.N.

Petition No. 2021-1192

1. Lynn Dougan, R.N. of Southington, Connecticut (hereinafter "respondent") was issued license number E50789 on March 31, 1988. She graduated from Quinnipiac College School of Nursing in 1988.
2. At all relevant times, respondent was employed as a nurse at the Trustaff Staffing Agency, placed in a Post-Anesthesia Care Unit at Tri City Medical Center in Oceanside, California
3. On or about August 26, 2021, while working as a nurse, respondent abused and/or used to excess alcohol.
4. Respondents abuse and/or utilization to excess of alcohol does and/or may affect her practice as a nurse.
5. The above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to §20-99(b)(2).
6. Past discipline: NA
7. For the foregoing reasons, the Department believes that respondent's continued practice as a nurse represents a clear and immediate danger to the public health and safety. The Department respectfully requests that this Board summarily suspend respondent's license until a full hearing on the merits can be held.

CONFIDENTIALITY NOTICE: This document and all attachments may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition.

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Lynn Dougan, R.N.

Petition No. 2021-1192

MOTION FOR SUMMARY SUSPENSION

The Department of Public Health (hereinafter "the Department") hereby moves in accordance with the General Statutes of Connecticut §§4-182(c) and 19a-17(c) that the Connecticut Board of Examiners for Nursing summarily suspend the license of Lynn Dougan to practice nursing in Connecticut. This motion is based on the attached Statement of Charges, Affidavits and on the Department's information and belief that the continued practice of nursing represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 11th day of May 2022.



Christian D. Andresen, MPH, CPH, Section Chief
Healthcare Quality and Safety Branch

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Lynn Dougan, R.N.

Petition No. 2021-1192

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Lynn Dougan:

1. Lynn Dougan of Southington, Connecticut (hereinafter "respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut Registered Nurse license number E50789.
2. At all relevant times, respondent was employed as a nurse at the Truststaff Staffing Agency, placed in a Post-Anesthesia Care Unit at Tri City Medical Center in Oceanside, California.
3. On or about August 26, 2021, while working as a nurse, respondent abused and/or used to excess alcohol.
4. Respondents abuse and/or utilization to excess of alcohol does and/or may affect her practice as a nurse.
5. The above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to §20-99(b)(2).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by the General Statutes of Connecticut, §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Lynn Dougan as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 11th day of May 2022.



Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing & Investigations Section
Healthcare Quality and Safety Branch

SUMMARY SUSPENSION COVER SHEET

In Re: Rachel Pisani, APRN, RN

Petition No. 2021-1209

Petition No. 2021-1223

1. Rachel Pisani (“respondent”) graduated from Yale University and received her registered nursing license in 2011. She received an advanced degree from Yale University in 2013 and her advanced practice registered nurse license in 2014. She has no prior discipline.
2. On or about November 11, 2021, respondent abused or used to excess cocaine and/or amphetamine (“substance abuse”).
3. From approximately November 11, 2021 to the present, respondent has or had one or more emotional disorders and/or mental illnesses (“illnesses”).
4. Respondent’s illnesses and/or substance abuse does, and/or may, affect her practice of nursing.
5. For the foregoing reasons, the Department believes that respondent’s continued nursing practice represents a clear and immediate danger to the public health and safety. The Department respectfully requests that the Board summarily suspend respondent’s registered and advanced practice registered nurse licenses until a full hearing on the merits can be held.

CONFIDENTIALITY NOTICE: This document and all attachments may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition. Thank you.

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In Re: Rachel Pisani, APRN, RN

Petition No. 2021-1209

Petition No. 2021-1223

MOTION FOR SUMMARY SUSPENSION

The Department of Public Health ("the Department") moves, in accordance with Connecticut General Statutes §§4-182(c) and 19a-17(c), the Connecticut Board of Examiners for Nursing to summarily suspend respondent's Connecticut registered nurse license number 098569 and Connecticut advanced practice registered nurse license number 006018. This motion is based on the attached Statement of Charges, affidavit, records and the Department's information and belief that respondent's continued nursing practice represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 13th day of May 2022.



Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In Re: Rachel Pisani, APRN, RN

Petition No. 2021-1209

Petition No. 2021-1223

STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes §§19a-10 and 19a-14, the Department of Public Health ("Department") brings the following charges against Rachel Pisani:

1. Rachel Pisani of Meriden, Connecticut ("respondent") is, and at all times referenced in this Statement of Charges, the holder Connecticut registered nurse license number 098569 and Connecticut advanced practice registered nurse license number 006018.
2. On or about November 11, 2021, respondent abused or used to excess cocaine and/or amphetamine ("substance abuse").
3. From approximately November 11, 2021 to the present, respondent has or had one or more emotional disorders and/or mental illnesses ("illnesses").
4. Respondent's illnesses and/or substance abuse does, and/or may, affect her practice of nursing.
5. The above-described conduct constitutes grounds for disciplinary action pursuant to Connecticut General Statutes §20-99(b), including, but not necessarily limited to:
 - a. §20-99(b)(4); and/or
 - b. §20-99(b)(5).

THEREFORE, the Department prays:

The Connecticut Board of Examiners for Nursing as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke, or order other disciplinary action against respondent's nursing licenses as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 13th day of May 2022.



Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Toni Barstow, L.P.N.

Petition No. 2021-981

CONSENT ORDER REVIEW COVER SHEET

1. Toni Barstow ("respondent") of Moosup, Connecticut graduated from Bristol Plymouth Regional Vocational Technical School in 1997. She was granted a Connecticut licensed practical nurse license in 2003.

Respondent also holds a Massachusetts nursing license.

2. Respondent has not previously been disciplined.
3. On September 21, 2021, the Massachusetts Board of Registration in Nursing ordered a Consent Agreement for Probation in part, placing respondent's Massachusetts nursing licensee on probation for no less than twelve (12) months based upon respondent's admission that in April 2019, while employed nurse and caring for a patient in a home setting, she communicated, via text and social media, in an inappropriate manner with the minor child of the patient's caregiver.
4. Respondent is not practicing nursing in Connecticut.
5. The proposed Consent Order places a reprimand on respondent's license. If she intends to practice nursing in Connecticut, she must give written notice to the Department within ninety (90) days. Respondent agrees that the Department may require respondent to satisfy additional terms and/or conditions before she may practice nursing in Connecticut.
6. The Department and respondent, through her counsel, respectfully request the Board to accept and order the proposed Consent Order.

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK COUNTY

BOARD OF REGISTRATION
IN NURSING

In the Matter of
Toni Barstow
LICENSE NO. LN58735
LICENSE EXP. 03/02/2023

Docket No. NUR-2019-0166

CONSENT AGREEMENT FOR PROBATION

The **Massachusetts Board of Registration in Nursing (Board)** and **Toni Barstow (Licensee)**, a Licensed Practical Nurse (LPN) licensed by the Board, License No. LN58735, do hereby stipulate and agree that the following information shall be entered into and become a permanent part of the Licensee's record maintained by the Board:

1. The Licensee acknowledges that a complaint has been filed with the Board against her Massachusetts Licensed Practice Nurse license (license¹) related to the conduct set forth in paragraph 2, identified as Docket No. NUR-2019-0166 (the Complaint).
2. The Licensee admits that while employed as a Licensed Practical Nurse by Shriver Nursing Services in Westborough, MA, on various dates in April 2019, while caring for a patient in a home setting she communicated, via text and social media, in an inappropriate manner with the minor child of the patient's caregiver. The Licensee acknowledges that her conduct constitutes failure to comply with the Board's Standards of Conduct at 244 Code of Massachusetts Regulations (CMR) 9.03(5), (24), (47) and warrants disciplinary action by the Board under Massachusetts General Laws (G.L.) Chapter 112, section 61 and Board regulations at 244 CMR 7.04, Disciplinary Actions.
3. The Licensee agrees that her nursing license shall be placed on monitored PROBATION for no less than twelve (12) months (Probationary Period),

¹ The term "license" applies to both a current license and the right to renew an expired license.

commencing with the date on which the Board signs this Agreement (Effective Date).

4. During the Probationary Period, the Licensee further agrees that she shall comply with all of the following requirements to the Board's satisfaction:
 - a. Comply with all laws and regulations governing the practice of nursing, and not engage in any continued or further conduct such as that set forth in Paragraph 2.
 - b. Notify the Board in writing within ten (10) days of each change in her name and/or address.
 - c. Timely renew her license to practice nursing.
 - d. Respond to inquiries from Board staff in a timely manner.
 - e. Disclose the terms of this Agreement to the Program Administrator of any Nursing Education Program at which she is enrolled during the Probationary Period.
 - f. Maintain active employment (Active Practice Requirements) in a position that requires a nursing license, in a facility setting where the Licensee receives consistent, on-site supervision by a qualified licensed nurse² for a minimum average of twenty (20) hours per week throughout the Probationary Period.
 - i. The Licensee agrees that a qualified licensed nurse is defined as a nurse who 1) possesses a Massachusetts³ nursing license in good standing or authority to practice under federal law, or both; 2) is employed in a supervisory role; 3) possesses a minimum of one year full-time experience in nursing, or its equivalent, within the last five years; 4) is educationally prepared at or above the level of the Licensee; and 5) has no open complaints with the Board and no open criminal matters.
 - g. Refrain from the practice of nursing in any of the following employment settings during the Probationary Period:
 - i. Settings where structured, consistent on-site supervision is not in place including but not limited to, home care agencies or private home care;

² The Licensee must receive direct supervision from a qualified licensed nurse who is employed in a supervisory role and is physically located at all times in each facility in which the Licensee practices nursing.

³ Or a license to practice in the jurisdiction in which the Licensee is employed.

- ii. Travel nurse agencies; or
 - iii. Temporary staffing agencies.
- h. Review this Agreement with each of her nursing supervisors and arrange for each nursing supervisor to submit directly to the Board:
- i. a completed and signed "Supervisor Verification Form" (Form 1), provided with this Agreement, within thirty (30) days of
 - (1) the Effective Date and
 - (2) any subsequent employment commenced during the Probationary Period
 - ii. quarterly written reports⁴, using the "Supervision Report Form" (Form 2) provided with this Agreement attesting to the quality of the Licensee's nursing practice, reliability and attendance and specifically addressing Licensee's observance of professional standards in interacting with patients and their caregivers including any errors and incidents. The Board may take action pursuant to paragraph 8 in the event that any quarterly report reveals a practice issue the Board deems significant.
- i. Within 30 days of the Effective Date, notify the Board in writing if the Licensee is not employed in accordance with paragraph 4f.
- j. If not employed in accordance with paragraph 4f within 30 days of the Effective Date:
- i. On a weekly basis: actively search for nursing employment.
 - ii. On a monthly basis: submit to the Board a detailed description of her nursing job search activities and the status of her nursing employment.
- k. Complete the Active Practice Requirements within a period up to a maximum of double the length of the Probationary Period.⁵
- l. Notify the Board in writing within seven (7) days of any change in the Licensee's employment status, including each change in Employer, each resignation or termination, and the name, address and telephone number of each new Employer.

⁴ The Licensee is responsible for ensuring that these reports on the required form are received by the Board commencing ninety (90) days after the Effective Date and on the first day of every third month thereafter.

⁵ The Probationary Period is defined in Paragraph 3.

- m. Notify the Board in writing within seven (7) days of any complaint filed against her nursing license in any jurisdiction in which she holds such a license.
5. The Licensee agrees that Board staff may, pending review by the Board, take immediate action to restrict nursing practice privileges following: a report from an out of state employer that the Licensee is under investigation for a practice issue which violates Board regulations at 244 CMR 9.00 et seq.

Immediate action that Board staff may take includes notifying the Licensee and any employer where the Licensee may be engaged in nursing practice, that the Licensee's nursing practice privileges have been restricted by the Board. Board staff shall inform the Licensee of the factual basis for taking immediate action. In the event that the Licensee disputes the factual basis, the Licensee agrees to refrain from the practice of nursing pursuant to her Massachusetts license until such time as the Board either determines that there is no violation, or takes action pursuant to paragraph 8.

6. The Board agrees that in return for the Licensee's execution and successful compliance with all the requirements of this Agreement it will not prosecute the Complaint.
7. If the Licensee has complied to the Board's satisfaction with all the requirements contained in this Agreement, the Probationary Period will terminate 12 months after the Effective Date upon written notice to the Licensee from the Board⁶.
8. If the Licensee does not comply with each requirement of this Agreement, or if the Board opens a Subsequent Complaint⁷ during the Probationary Period, the Licensee agrees to the following:
 - a. The Board may upon written notice to the Licensee, as warranted to protect the public health, safety, or welfare:
 - i. EXTEND the Probationary Period; and/or
 - ii. MODIFY the Probation Agreement requirements; and/or
 - iii. IMMEDIATELY SUSPEND the Licensee's nursing license.

⁶ In all instances where this Agreement specifies written notice to the Licensee from the Board, such notice shall be sent to the Licensee's address of record.

⁷ The term "Subsequent Complaint" applies to a complaint opened after the Effective Date, which (1) alleges that the Licensee engaged in conduct that violates Board statutes or regulations, and (2) is substantiated by evidence, as determined following the complaint investigation during which the Licensee shall have an opportunity to respond.

Dennis Barstow 9/2/21
Witness (sign and date)

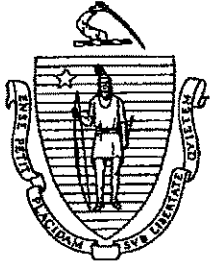
Toni Barstow 9/2/21
Licensee (sign and date)

Dennis Barstow
Witness (print name)

Clarice Macdonald
Lorcna Silva-Herman, MSN-L, MBA, DNP, RN ^{etm}
Acting Executive Director Clarice Macdonald, DNP
Board of Registration in Nursing RN

September 21, 2021
Effective Date of Probation Agreement

Fully Signed Agreement Sent to Licensee on September 23, 2021 by Certified
Mail No. 7019 0140 0000 72174849



Commonwealth of Massachusetts
Department of Public Health
Bureau of Health Professions Licensure
Board of Registration in Nursing
239 Causeway Street • Boston, Massachusetts 02114

**SUPERVISOR VERIFICATION, AND AGREEMENT TO
MONITOR PRACTICE AND PROVIDE PERIODIC REPORTS
TO THE BOARD OF REGISTRATION IN NURSING**

Name of Nurse on Probation _____
License Type and No. _____ Docket No(s). _____
Effective Date of the Probation Agreement or Order: _____
Length of Probation (specified in Agreement or Order): _____
Nurse's Date of Employment: _____ Nurse's Job Title: _____
Employer Name and Address: _____

I, _____ (print supervisor's full name) on _____ (insert date) reviewed a signed copy of the Probation Agreement (Agreement) or Order between _____ (insert nurse's name) and the Board of Registration in Nursing (Board). I hereby agree that I will monitor and evaluate this nurse's practice as specified in the Agreement or Order, and will provide written reports to the Board on the Supervision Report form provided by the Board at the intervals required by the Agreement or Order.

I also agree to promptly notify the Board's Probation Compliance Officer if the nurse resigns or is terminated from employment.

I further certify that I am a RN / LPN (circle one), have completed at least one (1) year of clinical nursing practice, and that I do not have any open administrative or criminal complaint by any Board of Nursing.

SUPERVISOR'S SIGNATURE _____ Date: _____

(Print/Type: Name and Title of Supervisor completing this form)

Supervisor's License Type and No.: _____ Supervisor Phone No.: _____

PLEASE NOTE CAREFULLY: This completed form must be mailed *with* the supervisor's signed cover letter written on the facility's letterhead directly to: Probation Compliance Officer
DPH – BHPL, Board of Registration in Nursing
239 Causeway Street, 5th Floor



Commonwealth of Massachusetts
 Department of Public Health
 Bureau of Health Professions Licensure
Board of Registration in Nursing
 239 Causeway Street • Boston, Massachusetts 02114
**SUPERVISION REPORT FOR NURSES ON PROBATION
 WITH THE BOARD OF REGISTRATION IN NURSING**

(Please review the nurse's Probation Agreement or Order and complete this evaluation of the nurse's practice)

Nurse's Name: _____ Docket No.: _____

License Type and No.: _____ Expiration Date _____

Nurse's Job Title: _____

Employer Name and Address: _____

Time period covered by this supervision report: Start Date: _____ to End Date: _____

Rate the following and explain any "Does Not Meet" ratings (use the "Comments" column and if needed the back of this form or include on supervisor's signed cover letter on facility letterhead).

Quality being rated	Does Not Meet	Meets	Comments
Organizes and plans work effectively	<input type="checkbox"/>	<input type="checkbox"/>	
Completes assignments	<input type="checkbox"/>	<input type="checkbox"/>	
Works as a team member	<input type="checkbox"/>	<input type="checkbox"/>	
Communicates effectively	<input type="checkbox"/>	<input type="checkbox"/>	
Seeks guidance and supervision appropriately	<input type="checkbox"/>	<input type="checkbox"/>	
Interacts with patients in a therapeutic manner	<input type="checkbox"/>	<input type="checkbox"/>	
Demonstrates problem solving ability	<input type="checkbox"/>	<input type="checkbox"/>	
Manages stressful situations appropriately	<input type="checkbox"/>	<input type="checkbox"/>	
Makes timely and appropriate nursing assessments	<input type="checkbox"/>	<input type="checkbox"/>	
Makes appropriate nursing interventions	<input type="checkbox"/>	<input type="checkbox"/>	
Delegates nursing care activities appropriately	<input type="checkbox"/>	<input type="checkbox"/>	
Removes, handles, wastes, and accounts for the whereabouts of, medications appropriately	<input type="checkbox"/>	<input type="checkbox"/>	
Documents controlled substances and medication administrations accurately and completely	<input type="checkbox"/>	<input type="checkbox"/>	
Documents nursing care and interventions accurately and completely	<input type="checkbox"/>	<input type="checkbox"/>	
Other practice skill(s) specified by Probation Agreement or Order	<input type="checkbox"/>	<input type="checkbox"/>	

**SUPERVISION REPORT FOR NURSES ON PROBATION WITH THE BOARD OF
REGISTRATION IN NURSING (continued)**

The nurse HAS HAS NOT (please choose one and do not leave any blanks) worked an average of at least twenty (20) hours per week during the time period covered by this report.

SUPERVISION

How frequently is the nurse supervised? _____

How is supervision provided? _____

Have there been any incidents involving the nurse requiring counseling, conference, oral/written warnings since last report? If yes, please explain and attach copies of all relevant documents.

How often are the nurse's patient records reviewed? _____

Does this nurse have any other nursing practice issues? Explain. _____

ADDITIONAL COMMENTS are appreciated.

(If needed, please use the back of this form or include on supervisor's signed cover letter on facility letterhead)

Please call the Probation Compliance Officer at (617) 973-0863 to discuss any concerns or for clarification regarding the nurse's probation.

SUPERVISOR'S SIGNATURE: _____ DATE SIGNED _____

(Print/Type: Name and Title of Supervisor completing this form)

Supervisor's License Type and No.: _____ Supervisor Phone No.: _____

PLEASE NOTE CAREFULLY:

This fully completed form must be mailed *with* the supervisor's signed cover letter written on the facility's letterhead directly to: Probation Compliance Officer
DPH – DBPL, Board of Registration in Nursing
239 Causeway Street, 5th Floor
Boston, MA 02114

**SUPERVISION REPORT FOR NURSES ON PROBATION WITH THE BOARD OF
REGISTRATION IN NURSING (continued)**

The nurse HAS HAS NOT (please choose one and do not leave any blanks) worked an average of at least twenty (20) hours per week during the time period covered by this report.

SUPERVISION

How frequently is the nurse supervised? _____

How is supervision provided? _____

Have there been any incidents involving the nurse requiring counseling, conference, oral/written warnings since last report? If yes, please explain and attach copies of all relevant documents.

How often are the nurse's patient records reviewed? _____

Does this nurse have any other nursing practice issues? Explain. _____

ADDITIONAL COMMENTS are appreciated

(If needed, please use the back of this form or include on supervisor's signed cover letter on facility letterhead)

Please call the Probation Compliance Officer at (617) 973-0863 to discuss any concerns or for clarification regarding the nurse's probation.

SUPERVISOR'S SIGNATURE: _____ DATE SIGNED _____

(Print/Type: Name and Title of Supervisor completing this form)

Supervisor's License Type and No.: _____ Supervisor Phone No.: _____

PLEASE NOTE CAREFULLY:

This fully completed form must be mailed *with* the supervisor's signed cover letter written on the facility's letterhead directly to: Probation Compliance Officer
DPH – DBPL, Board of Registration in Nursing
239 Causeway Street, 5th Floor
Boston, MA 02114

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Toni Barstow, LPN

Petition No. 2021-981

CONSENT ORDER

WHEREAS, Toni Barstow ("respondent") of Moosup, Connecticut has been issued Connecticut licensed practical nurse license number 029917 by the Department of Public Health ("Department") pursuant to Connecticut General Statutes, Chapter 378, as amended.

WHEREAS, respondent has been issued Massachusetts licensed practical nurse license number LN58735.

WHEREAS, respondent admits:

1. On or about September 21, 2021, the Massachusetts Board of Registration in Nursing ordered a Consent Agreement for Probation in Docket No. NUR-2019-0166 ("Massachusetts Agreement") in part, placing respondent's Massachusetts nursing licensee on probation for no less than twelve (12) months based upon respondent's admission that in April 2019, while employed as nurse and caring for a patient in a home setting, she communicated, via text and social media, in an inappropriate manner with the minor child of the patient's caregiver.
2. Respondent failed to notify the Department of the Massachusetts Agreement within thirty (30) days of its effective date as required by Connecticut General Statutes §19a-12e(e).
3. The above-described facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §§19a-17(f) and/or 20-99(b), including but not limited to 20-99(b)(2).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above admitted violations at a hearing in front of the Board of Examiners for Nursing ("Board"). Respondent

further agrees that this Consent Order shall have the same effect as if ordered after a full hearing pursuant to Connecticut General Statutes §§19a-9, 19a-10 and 20-99(a).

WHEREAS, respondent does not currently practice nursing in the State of Connecticut.

NOW THEREFORE, pursuant to Connecticut General Statutes §§19a-17 and 20-99(a), respondent stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this petition.
2. Respondent's Connecticut licensed practical nurse license number 129607 is hereby reprimanded.
3. If respondent intends to commence the practice of nursing in Connecticut, respondent shall give written notice to the Department no less than ninety (90) days before said commencement.

Respondent agrees that the Department may require respondent to satisfy additional terms and/or conditions before respondent may resume the practice of nursing in Connecticut. Respondent agrees that any commencement of the practice of nursing in Connecticut in disregard of the above shall constitute a violation of this Consent Order and may subject respondent to further disciplinary action.

4. All correspondence and reports are to be addressed to:

Practitioner Compliance and Monitoring Unit
Department of Public Health
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308

5. Respondent shall comply with all federal and state statutes and regulations applicable to her profession.

6. Any violation of the terms of this Consent Order without prior written approval by the Board shall constitute grounds for the Department to seek revocation of respondent's nursing license following notice and an opportunity to be heard.
7. Respondent shall pay all costs necessary to comply with this Consent Order.
8. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Department.
9. This Consent Order is effective on the date it is approved and ordered by the Board.
10. Respondent understands this Consent Order is a public record.
11. Respondent understands this Consent Order shall be deemed as evidence of the above admitted violations in any proceeding before the Board in which (1) her compliance with this same Consent Order is at issue, or (2) her compliance with Connecticut General Statutes §20-99(b), as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank and the Healthcare Integrity and Practitioner Data Bank maintained by the United States Department of Health and Human Services.
12. If respondent violates any term of this Consent Order, respondent agrees immediately to refrain from practicing nursing, upon request by the Department, for a period not to exceed forty-five (45) days. During that time, respondent further agrees to cooperate with the Department in its investigation of the violation. Respondent further agrees that failure to cooperate with the Department in its investigation during said forty-five (45) day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that failure to cooperate with the Department's investigation shall be considered and given due weight by the Board in determining whether respondent's conduct constitutes a clear and immediate danger as required pursuant to Connecticut General Statutes

§§4-182(c) and 19a-17(c). Respondent understands that the Board has complete and final discretion whether a summary suspension is ordered.

13. In the event respondent violates any term of this Consent Order, said violation may also constitute grounds for the Department to seek a summary suspension of respondent's nursing license before the Board.
14. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent Order shall not be subject to modification because of any claim that the terms or conditions may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to Connecticut General Statutes §4-181a the without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this Consent Order. Further, this Consent Order is not subject to appeal or review under the provisions of Connecticut General Statutes Chapters 54 and 368a, provided that this stipulation shall not deprive respondent of any other rights that respondent has under Connecticut or United States law.
15. Respondent permits a representative of the Department to present this Consent Order and its factual basis to the Board. Respondent agrees that the Board has complete and final discretion whether an executed Consent Order is approved or accepted. Respondent waives any claim of error that could be raised that is related to or arises during the Board's discussions regarding whether to approve or reject this Consent Order and/or a Board member's participation during this process, through the Board member's review or comments, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision and/or final decision by the Board.

16. This Consent Order is a revocable offer of settlement, which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
17. Respondent has been advised that she has right to consult with an attorney prior to signing this Consent Order.
18. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only and is not intended to affect any civil or criminal liability or defense.
19. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

I, Toni Barstow, have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Toni Barstow
Toni Barstow

Subscribed and sworn to before me this 2nd day of May, 2022.

Mand
Commissioner Superior Court/Notary Public

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 4th day of May, 2022, it is hereby accepted.

Christian D. Andresen
Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented the Connecticut Board of Examiners for Nursing on the _____ day of _____, 2022, it is hereby ordered and accepted.

BY: _____
Connecticut Board of Examiners for Nursing

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Toni Barstow, LPN

Petition No. 2021-981

CONSENT ORDER REVIEW AGREEMENT

I, Toni Barstow, agree to a review of the proposed Consent Order and the attached documentation during the Connecticut Board of Nursing ("Board") meeting regarding the above-referenced Petition. I permit any communication between the Office of Legal Compliance and the Board or any Board member for the purpose considering the Consent Order.

I agree that the Board may review and examine any or all documents and/or facts relative to this matter involving my Connecticut nursing license when considering the above-referenced petition. I agree that the Board may accept the Consent Order under consideration, propose alternative terms for a Consent Order, recommend a formal hearing proceed, or make any other recommendations. I agree that if this petition is brought before the Board as a formal hearing, the review of documents or facts during the meeting shall not unfairly or illegally prejudice the Board or any members thereof from participating in a formal hearing on a statement of charges involving my Connecticut nursing license. I waive any right I may have to challenge the composition of the Board and/or the ability of any Board member from participating in a formal hearing on a statement of charges based on the review of the documents, discussions, and/or facts cited during the meeting.

I waive any claim of error that could be raised that is related to or arises during the Board's discussions, review, comments, and/or participation during the meeting, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a formal hearing on a Statement of Charges.

I agree that the Board has complete and final discretion as to whether terms for a Consent Order or other recommendation are proposed and that, if terms for a resolution are proposed, said recommendation of the Board is not binding on the Department or me.

I consulted with my ^{Attorney} before signing this Consent Order Review Agreement.

Toni Barstow
Toni Barstow

Sworn and subscribed to before me this 2 day of May 2022 at May ^{130pm}
HARTFORD, CT

[Signature]
Notary Public/Commissioner Superior Court

CONSENT ORDER COVER SHEET

In re: Lunie LaFrance, R.N.

Petition No. 2021-733

1. Lunie LaFrance of Waterbury, Connecticut ("respondent") graduated from Fairfield University and was issued a Connecticut registered nurse license in 2010.
2. Respondent's Connecticut registered nursing license had not been previously disciplined.
3. Respondent admits that while practicing nursing at Waterbury Gardens Nursing and Rehabilitation respondent failed to meet the standard of care for a ventilator dependent resident in that, on or about June 25, 2020, respondent: (a) failed to appropriately respond when resident #1's ventilator alarm activated and the ventilator tube became disconnected; (b) failed to check for vital signs when respondent found resident #1 unresponsive; (c) failed to timely initiate CPR, page an emergency code and/or call emergency services when resident #1 was unresponsive; and/or (d) inappropriately requested a licensed practical nurse assume responsibility for resident #1 while respondent attempted to locate the staff respiratory therapist and/or retrieve the emergency crash cart.
4. The proposed Consent Order provides for a reprimand and a one (1) year probationary period to include the successful completion of coursework, pre-approved by the Department in scope of practice, critical thinking skills, management of a ventilator dependent patient and responding to a medical emergency (which must include an in-person skills assessment component); quarterly written employer reports, and no self-employment or employment for a personnel provider service, assisted living services agency, homemaker-home health aide agency or home health care agency.
5. The Department and respondent respectfully request that the Board accept the proposed Consent Order.

CONFIDENTIALITY NOTICE: This document and all attachments may contain information that is confidential or privileged. Please do not disseminate, distribute or copy the contents or discuss with parties who are not directly involved in this petition. Thank you.

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Lunie LaFrance, R.N.

Petition No. 2021-733

CONSENT ORDER

WHEREAS, Lunie LaFrance ("respondent") of Waterbury, Connecticut has been issued license number 097081 to practice as a registered nurse by the Connecticut Department of Public Health ("the Department") pursuant to Connecticut General Statutes Chapter 378, as amended; and,

WHEREAS, respondent hereby admits that:

1. On or about June 25, 2020, respondent was practicing nursing at Waterbury Gardens Nursing and Rehabilitation ("the facility") in Waterbury, Connecticut.
2. At that time, resident #1, a ventilator dependent resident of the facility, had a physician's order of full code that required the administration of cardiopulmonary resuscitation ("CPR").
3. On or about June 25, 2020, respondent's care for resident #1 failed to meet the standard of care in one or more of the following ways, in that respondent:
 - a. failed to appropriately respond when resident #1's ventilator alarm activated and the ventilator tube became disconnected;
 - b. failed to check for vital signs when respondent found resident #1 unresponsive;
 - c. failed to timely initiate CPR, page an emergency code and/or call emergency services when resident #1 was unresponsive; and/or

- d. inappropriately requested a licensed practical nurse assume responsibility for patient #1 while respondent attempted to locate the staff respiratory therapist and/or retrieve the emergency crash cart.
4. The above-described facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99(b), including but not limited to §20-99(b)(2).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above-admitted violations at a hearing before the Board of Examiners for Nursing ("the Board").

Respondent agrees that for the purpose of this or any future proceedings before the Board this Consent Order shall have the same effect as if ordered after a full hearing held pursuant to Connecticut General Statutes §§19a-9, 19a-10, and 20-99(a).

NOW THEREFORE, pursuant to Connecticut General Statutes §19a-17 and §20-99(a), respondent hereby stipulates and agrees to the following:

1. Respondent waives respondent's right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations applicable to respondent's profession.
3. Respondent's license number 097081 to practice as a registered nurse in the State of Connecticut is hereby reprimanded.
4. Respondent's registered nurse license number 097081 is placed on probation for one (1) year, subject to the following terms and conditions:
 - A. If employed as a nurse, respondent shall provide a copy of this Consent Order to all current and future employers for the duration of probation. The Department shall be

- notified in writing by any such employer(s) within fifteen (15) days of the commencement of employment confirming receipt of a copy of this Consent Order.
- B. Respondent shall not be employed as a nurse for a personnel provider service, assisted living services agency, homemaker - home health aide agency, or home health care agency, and shall not be self-employed as a nurse for the period of probation.
 - C. If employed as a nurse, respondent shall be responsible for providing quarterly written reports directly to the Department from respondent's nursing supervisor. Employer reports shall include documentation of respondent's ability to practice nursing safely and competently and shall be issued to the Department at the address cited in paragraph 4I below. A report indicating that respondent is not practicing with reasonable skill and safety shall be deemed to be a violation of this Consent Order.
 - D. Respondent shall attend and successfully complete coursework, pre-approved by the Department, in scope of practice, critical thinking skills, management of a ventilator dependent patient and responding to a medical emergency (which must include an in-person skills assessment component), within the first ninety (90) days of the probationary period. Within fifteen (15) days of the completion of each course, respondent shall provide proof, to the Department's written satisfaction, of the completion of each course.
 - E. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.
 - F. Respondent shall notify the Department of any change in respondent's home or business address within fifteen (15) days of such change.

- G. If respondent pursues further training or is engaged at the time of the implementation of the Consent Order, in an educational program in any subject area that is regulated by the Department, respondent shall provide a copy of this Consent Order to the educational institution or, if not an institution, to respondent's instructor. Such institution or instructor shall notify the Department of receipt of the Consent Order within fifteen (15) days of receipt.
- H. All reports required by the terms of this Consent Order shall be due according to a schedule to be established by the Department of Public Health.
- I. All correspondence and reports shall be addressed to:

Practitioner Compliance and Monitoring Unit
Department of Public Health
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308

- 5. Any violation of the terms of this Consent Order without prior written approval by the Department shall constitute grounds for the Department to seek revocation of respondent's nursing license following notice and an opportunity to be heard.
- 6. Respondent shall pay all costs necessary to comply with this Consent Order.
- 7. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to take action at a later time. The Department shall not be required to grant future extensions of time or grace periods.
- 8. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.

9. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.
10. Respondent understands this Consent Order is a public record.
11. Respondent understands and agrees that this Consent Order shall be deemed as evidence of the above-admitted violations in any proceeding before the Board in which respondent's compliance with this Consent Order or with Connecticut General Statutes §20-99(b), as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank maintained by the United States Department of Health and Human Services.
12. If respondent violates any term of this Consent Order, respondent agrees immediately to refrain from practicing as a nurse, upon request by the Department, for a period not to exceed forty-five (45) days. Respondent further agrees that failure to cooperate with the Department in its investigation during said forty-five (45) day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that failure to cooperate with the Department's investigation shall be considered by the Board and shall be given due weight by the Board in determining whether respondent's conduct constitutes a clear and immediate danger as required pursuant to Connecticut General Statutes §§4-182(c) and 19a-17(c). Respondent understands that the Board has complete and final discretion as to whether a summary suspension is ordered.
13. In the event respondent does not practice as a nurse for periods of thirty (30) consecutive days or longer, respondent shall notify the Department in writing. Such periods of times shall not be counted in reducing the probationary period covered by this Consent Order and such terms shall be held in abeyance. During such time period, respondent shall not be responsible for

complying with the terms of probation of this Consent Order. In the event respondent resumes the practice of nursing, respondent shall provide the Department with thirty (30) days prior written notice. Respondent shall not return to the practice of nursing without written pre-approval from the Department. Respondent agrees that the Department, in its complete discretion, may require additional documentation from respondent and/or require respondent to satisfy other conditions or terms as a condition precedent to respondent's return to practice. Respondent agrees that any return to the practice of nursing without pre-approval from the Department shall constitute a violation of this Consent Order and may subject the respondent to further disciplinary action.

14. If, during the period of probation, respondent practices nursing outside Connecticut, respondent shall provide written notice to the Department concerning such practice. During such time period, respondent shall not be responsible for complying with the terms of probation of this Consent Order, and such time period shall not be counted in reducing the probationary period covered by this Consent Order. Respondent may comply with the terms of probation while practicing outside Connecticut if pre-approved by the Department. In the event respondent intends to return to the practice of nursing in Connecticut, respondent shall provide the Department with thirty (30) days prior written notice and agrees to comply with all probationary terms and conditions contained in this Consent Order.
15. In the event respondent violates any term of this Consent Order, said violation may also constitute grounds for the Department to seek a summary suspension of respondent's license before the Board.
16. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent

Order shall not be subject to modification as a result of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to Connecticut General Statutes §4-181a without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review under the provisions of Connecticut General Statutes Chapters 54 and 368a, provided that this stipulation shall not deprive respondent of any other rights that respondent may have under the laws of the State of Connecticut or of the United States.

17. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Board. The Department and respondent agree that the Board has complete and final discretion as to whether an executed Consent Order is approved or accepted. Respondent hereby waives any claim of error that could be raised that is related to or arises during the course of the Board's discussions regarding whether to approve or reject this Consent Order and/or a Board member's participation during this process, through the Board member's review or comments, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision and/or final decision by the Board.
18. This Consent Order is a revocable offer of settlement, which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
19. Respondent has had the opportunity to consult with an attorney prior to signing this document.

20. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only and is not intended to affect any civil or criminal liability or defense.

21. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

*

*

*

*

I, Lunie LaFrance, have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Lunie LaFrance
Lunie LaFrance, R.N.

Subscribed and sworn to before me this 21st day of March, 2022.

Janet Schmidt
Notary Public or person authorized by law to administer an oath or affirmation
My Commission expires 6-30-2022

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 31st day of March, 2022, it is hereby accepted.

Christian D. Andresen
Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented to the Connecticut Board of Examiners for Nursing on the _____ day of _____, 2022, it is hereby ordered and accepted.

BY: _____
Connecticut Board of Examiners for Nursing

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Donna Monticone, R.N.

Petition No. 2020-1112

CONSENT ORDER COVER SHEET

1. Donna Monticone ("respondent") graduated from Bridgeport Hospital School of Nursing in 2015. She was granted a registered nursing license in 2016.
2. Respondent's license was suspended pursuant to an Interim Consent Order in December 2020 as a result of the incident below. She has not previously been disciplined.
3. On multiple occasions from approximately June 2020 through October 2020, respondent diverted fentanyl from Yale University Reproductive Endocrinology and Infertility Clinic ("Yale") from patient stock for personal consumption. Respondent thereafter replaced the fentanyl with saline which was later utilized as patient medication.
4. On multiple occasions from approximately June 2020 through October 2020, respondent abused or used fentanyl to excess including while practicing nursing at Yale.
5. From approximately 2020 to the present, respondent has or had emotional disorders and/or mental illnesses ("illnesses").
6. On or about March 2, 2021, respondent pled guilty in United States District Court to Tampering with a Consumer Product.
7. The proposed Consent Order places a reprimand on respondent's license and contains the following terms and conditions:
 - respondent's license shall remain suspended for a period of six (6) months with weekly random urine screens;
 - following the six (6) month suspension, respondent's license shall be placed on probation for four (4) years, subject to the following terms and conditions:
 - a. urine screens weekly for the 1st and 4th year, twice monthly for the 2nd and 3rd years;

- b. therapy and employer reports monthly for the 1st and 4th year and quarterly for the 2nd and 3rd years;
 - c. no solo practice; and
 - d. narcotic access restricted for one year.
8. The proposed Consent Order was presented at the Board meeting on April 6, 2022 during which time the Board suggested adding language concerning respondent's reckless disregard of patient care and safety. The Department and respondent, through her attorney, respectfully request the Board to accept the proposed Consent Order which contains the additional language on page 1, paragraph 1.

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Donna Monticone, RN

Petition No. 2020-1112

CONSENT ORDER

WHEREAS, Donna Monticone ("respondent") of Oxford, Connecticut, has been issued registered nurse license number 131621 by the Connecticut Department of Public Health ("Department") pursuant to Connecticut General Statutes Chapter 378, as amended.

WHEREAS, respondent admits:

1. On multiple occasions from approximately June 2020 through October 2020, respondent diverted fentanyl from Yale University Reproductive Endocrinology and Infertility Clinic ("Yale") from patient stock for personal consumption. Respondent thereafter replaced the fentanyl with saline which was later utilized as patient medication in reckless disregard for patient care and safety.
2. On multiple occasions from approximately June 2020 through October 2020, respondent abused or used fentanyl to excess including while practicing nursing at Yale.
3. From approximately 2020 to the present, respondent has or had emotional disorders and/or mental illnesses ("illnesses").
4. Respondent's illnesses and/or abuse or excessive use of fentanyl does, and/or may, affect her practice of nursing.

5. On or about March 2, 2021, respondent pled guilty in United States District Court to Tampering with a Consumer Product in violation of Title 18, United States Code §§1365(a)(4) in Case No.: 3:21-cr-00031-JCH (“Judgment”).
6. The above-described facts constitute grounds for disciplinary action pursuant to of Connecticut General Statutes §20-99(b), including but not limited to:
 - a. §20-99(b)(2);
 - b. §20-99(b)(4);
 - c. §20-99(b)(5);
 - d. §20-99(b)(6);
 - e. §20-99(b)(7); and/or,
 - f. §20-99(b)(8).

WHEREAS, on December 22, 2020, respondent’s nursing license was suspended pursuant to an Interim Consent Order.

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above-admitted violations at a hearing before the Board of Examiners for Nursing ("Board"). Respondent agrees that for the purpose of this or any future proceedings before the Board this Consent Order shall have the same effect as if ordered after a full hearing pursuant to Connecticut General Statutes §§19a-9, 19a-10, and 20-99(a).

NOW THEREFORE, pursuant to Connecticut General Statutes §§19a-17 and 20-99(a), respondent hereby stipulates and agrees to the following:

1. Respondent waives her right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations applicable to respondent’s profession.
3. Respondent's Connecticut registered nurse license number 131621 is hereby reprimanded.

4. Respondent's license shall remain suspended for a period of six (6) months. During said six (6) month period of suspension, respondent shall not obtain or use controlled substances, legend drugs, marijuana, or alcohol in any form unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications. Respondent shall inform said health care professional of respondent's substance abuse history.

- (1) At respondent's own expense, respondent shall submit to observed random urine screens for drugs and alcohol, in accordance with Department Requirements for Drug and Alcohol Screens, attached hereto marked as ("Attachment 'A': Department Requirements for Drug and Alcohol Screens") at a testing facility approved by the Department. Laboratory reports of random alcohol and drug screens shall be submitted directly to the Department by the testing laboratory. All such observed random drug and alcohol screens shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening process. All laboratory reports shall indicate that the chain of custody procedure has been followed.
- (2) Respondent shall be responsible for notifying the laboratory, therapist, the Department and respondent's prescribing practitioner of any drug(s) respondent is taking. For the prescription of a controlled substance(s) for more than two consecutive weeks, the respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department, until such time as the controlled substance(s) are not prescribed by the provider, documenting the following:

1. A list of controlled substances prescribed by this provider for the respondent;
 2. A list of controlled substance(s) prescribed by other providers;
 3. An evaluation of the respondent's need for the controlled substance;
 4. An assessment of the respondent's continued need for the controlled substance(s).
- (3) There must be at least one such observed random alcohol/drug screen and accompanying laboratory report every week during the six-month period of suspension.
- (4) There must be at least two (2) random tests for Ethylglucuronide (EtG) and accompanying laboratory reports every month during the six-month period of suspension.
- (5) All screens shall be negative for the presence of drugs, marijuana and alcohol. Respondent agrees that an EtG test report of EtG at a level of 1000ng/mL or higher shall be deemed to constitute a positive screen for the presence of alcohol under this Consent Order. Respondent understands and agrees that if respondent fails to submit a urine sample when requested by respondent's monitor, such missed screen shall be deemed a positive screen.
- (6) All positive screen results shall be confirmed by gas chromatograph/mass spectrometer (GC/MS) testing.
- (7) Respondent is hereby advised that the ingestion of poppy seeds, mouthwash and over the counter cough or cold medicines or remedies has from time to time, been raised as a defense to a positive screen result for morphine, opiates and/or alcohol

and as a defense of an EtG at 1000ng/mL or higher. For that reason, respondent agrees to refrain from ingesting poppy seeds in any food substances, mouthwash and over the counter cough or cold medicines or remedies during the term of this Consent Order. In the event respondent has a positive screen for morphine, opiates and/or alcohol or if respondent's test reports an EtG at 1000ng/mL or higher, respondent agrees that the ingestion of poppy seeds and/or mouthwash and/or over the counter cough or cold medicines or remedies shall not constitute a defense to such a screen.

5. Following said six-month suspension, respondent's license shall be placed on probation for four (4) years, subject to the following terms and conditions:
 - A. At respondent's own expense, respondent shall engage in therapy and counseling with a Connecticut licensed therapist ("therapist") pre-approved by the Department for the entire probationary period.
 - (1) Respondent shall provide a copy of this Consent Order to respondent's therapist.
 - (2) Respondent's therapist shall furnish written confirmation to the Department of his or her engagement in that capacity and receipt of a copy of this Consent Order within fifteen (15) days of the effective date of this Consent Order.
 - (3) If respondent's therapist determines that therapy is no longer necessary, that a reduction in frequency of therapy is warranted, or that respondent should be transferred to another therapist, he or she shall advise the Department. Said termination of therapy, reduction in frequency of therapy, and/or respondent's transfer to another therapist shall not occur until approved by the Department. However, if therapy is terminated with approval of the Department, respondent's

therapist shall continue to monitor her alcohol and drug free status by monitoring and reviewing the observed random urine screens for drugs and alcohol as described in paragraph B below, and by providing the reports described in paragraph C below.

- (4) The therapist shall immediately notify the Department in writing if respondent discontinues therapy and/or terminates services.

B. Respondent shall not obtain or use controlled substances, legend drugs, marijuana, or alcohol in any form unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications. Respondent shall inform said health care professional of respondent's substance abuse history.

- (3) At respondent's own expense, respondent shall submit to observed random urine screens for drugs and alcohol, in accordance with Department Requirements for Drug and Alcohol Screens, attached hereto marked as ("Attachment 'A': Department Requirements for Drug and Alcohol Screens") at a testing facility approved by the Board, after consultation with the Department. Laboratory reports of random alcohol and drug screens shall be submitted directly to the Department by the testing laboratory. All such observed random drug and alcohol screens shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the screening process. All laboratory reports shall indicate that the chain of custody procedure has been followed.
- (4) Respondent shall be responsible for notifying the laboratory, therapist, the Department and respondent's prescribing practitioner of any drug(s) respondent is

taking. For the prescription of a controlled substance(s) for more than two consecutive weeks, the respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department, until such time as the controlled substance(s) are not prescribed by the provider, documenting the following:

5. A list of controlled substances prescribed by this provider for the respondent;
 6. A list of controlled substance(s) prescribed by other providers;
 7. An evaluation of the respondent's need for the controlled substance;
 8. An assessment of the respondent's continued need for the controlled substance(s).
- (3) There must be at least one such observed random alcohol/drug screen and accompanying laboratory report every week for the first and fourth years of probation; and at least two such screens and reports every month for the second and third years of probation.
- (4) There must be at least two (2) random tests for Ethylglucuronide (EtG) and accompanying laboratory reports every month for the first and fourth years of probation and at least (1) such random test and report every month for the remainder of the probationary period.
- (5) All screens shall be negative for the presence of drugs, marijuana and alcohol. Respondent agrees that an EtG test report of EtG at a level of 1000ng/mL or higher shall be deemed to constitute a positive screen for the presence of alcohol under this Consent Order. Respondent understands and agrees that if respondent

fails to submit a urine sample when requested by respondent's monitor, such missed screen shall be deemed a positive screen.

- (6) All positive screen results shall be confirmed by gas chromatograph/mass spectrometer (GC/MS) testing.
 - (7) Respondent is hereby advised that the ingestion of poppy seeds, mouthwash and over the counter cough or cold medicines or remedies has from time to time, been raised as a defense to a positive screen result for morphine, opiates and/or alcohol and as a defense of an EtG at 1000ng/mL or higher. For that reason, respondent agrees to refrain from ingesting poppy seeds in any food substances, mouthwash and over the counter cough or cold medicines or remedies during the term of this Consent Order. In the event respondent has a positive screen for morphine, opiates and/or alcohol or if respondent's test reports an EtG at 1000ng/mL or higher, respondent agrees that the ingestion of poppy seeds and/or mouthwash and/or over the counter cough or cold medicines or remedies shall not constitute a defense to such a screen.
- C. Respondent shall be responsible for the provision of written reports from respondent's therapist directly to the Department for the entire probationary period; monthly for the first and fourth years of probation; and, quarterly for the second and third years of probation. Such reports shall include documentation of dates of treatment, an evaluation of respondent's progress in treatment and of respondent's drug and alcohol-free status as established by the observed random urine screens for drugs and alcohol, an evaluation of respondent's ability to practice nursing safely and competently, and copies of all

laboratory reports. A report indicating that respondent is not able to practice nursing safely and competently shall be deemed to be a violation of this Consent Order.

- D. Notwithstanding the foregoing, respondent's therapist shall immediately report to the Department any confirmed positive alcohol/drug screen and any conduct or condition on respondent's part which does or may violate any federal or state statute or regulation applicable to respondent's profession.
- E. Respondent shall provide a copy of this Consent Order to all current and future employers for the duration of probation.
- F. Respondent shall not be employed as a nurse for a personnel provider service, assisted living services agency, homemaker-home health aide agency, or home health care agency, and shall not be self-employed as a nurse during the period of probation.
- G. Respondent shall not administer, count, or have access to narcotics or other controlled substances, or have responsibility for such activities while practicing nursing for the first year after returning to work as a nurse.
- H. If employed as a nurse, respondent shall provide a copy of this Consent Order to any and all employers during the probationary period. The Department shall be notified in writing by any such employer(s) within fifteen (15) days of the commencement of employment confirming receipt of a copy of this Consent Order.
- I. If employed as a nurse, respondent shall be responsible for the provision of written reports directly to the Department from respondent's nursing supervisor (i.e., Director of Nursing) monthly for the first and fourth years of his probation; and quarterly for the second and third years of probation. Employer reports shall include documentation of respondent's ability to safely and competently practice nursing, and shall be issued to the

Department at the address cited in paragraph P below. A report indicating that respondent is not practicing with reasonable skill and safety shall be deemed to be a violation of this Consent Order.

- J, Respondent shall be responsible for the provision of quarterly written reports directly to the Department from respondent's federal probation officer which shall include documentation of respondent's compliance with the terms and conditions of the Judgment. The reports shall be issued to the Department at the address cited in paragraph P below. A report indicating that respondent violated any terms or conditions of the Judgment shall be deemed to be a violation of this Consent Order.
- K. During the entire probationary period, respondent shall attend "anonymous" or support group meetings at least eight to ten times per month and provide quarterly reports to the Department concerning respondent's record of attendance.
- L. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.
- M. Respondent shall notify the Department of any change in respondent's home or business address within fifteen (15) days of such change.
- N. If respondent pursues further training or is engaged at the time of the implementation of the Consent Order, in an educational program in any subject area that is regulated by the Department, respondent shall provide a copy of this Consent Order to the educational institution or, if not an institution, to respondent's instructor. Such institution or instructor shall notify the Department of receipt of the Consent Order within fifteen (15) days of receipt.

O. All reports required by the terms of this Consent Order shall be due according to a schedule to be established by the Department of Public Health.

P. All correspondence and reports shall be addressed to:

Practitioner Compliance and Monitoring Unit
Department of Public Health
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308

6. Any violation of the terms of this Consent Order without prior written approval by the Department shall constitute grounds for the Department to seek revocation of respondent's nursing license following notice and an opportunity to be heard.
7. Respondent shall pay all costs necessary to comply with this Consent Order.
8. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to act later. The Department shall not be required to grant future extensions of time or grace periods.
9. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Department.
10. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.
11. Respondent understands this Consent Order is a public record.
12. Respondent understands and agrees that this Consent Order shall be deemed as evidence of the above-admitted violations in any proceeding before the Board in which (1) respondent's compliance with this same Consent Order is at issue, or (2) respondent's compliance with Connecticut General Statutes §20-99(b), as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the

National Practitioner Data Bank maintained by the United States Department of Health and Human Services.

13. If respondent violates any term of this Consent Order, respondent agrees immediately to refrain from practicing as a nurse, upon request by the Department, for a period not to exceed forty-five (45) days. During that time, respondent further agrees to cooperate with the Department in its investigation of the violation, and to submit to and complete a medical, psychiatric or psychological evaluation, if requested to do so by the Department; and, that the results of the evaluation shall be submitted directly to the Department. Respondent further agrees that failure to cooperate with the Department in its investigation during said forty-five (45) day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that failure to cooperate with the Department's investigation shall be considered by the Board and shall be given due weight by the Board in determining whether respondent's conduct constitutes a clear and immediate danger as required pursuant to Connecticut General Statutes §§4-182(c) and 19a-17(c). Respondent understands that the Board has complete and final discretion as to whether a summary suspension is ordered.
14. If, during the period of probation, respondent practices nursing outside Connecticut, respondent shall provide written notice to the Department concerning such practice. During such time, respondent shall not be responsible for complying with the terms of probation of this Consent Order, and such period shall not be counted in reducing the probationary period covered by this Consent Order. Respondent may comply with the terms of probation while practicing outside Connecticut if pre-approved by the Department. In the event respondent intends to return to the practice of nursing in Connecticut, respondent shall provide the

Department with thirty (30) days prior written notice and agrees to comply with all terms and conditions contained in paragraph 5 above.

15. In the event respondent violates any term of this Consent Order, said violation may also constitute grounds for the Department to seek a summary suspension of respondent's license
16. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent Order shall not be subject to modification because of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to Connecticut General Statutes §4-181a without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review under the provisions of Connecticut General Statutes Chapters 54 and 368a provided that this stipulation shall not deprive respondent of any other rights that respondent may have under the laws of the State of Connecticut or of the United States.
17. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Board. The Department and respondent agree that the Board has complete and final discretion as to whether an executed Consent Order is approved or accepted. Respondent hereby waives any claim of error that could be raised that is related to or arises during the course of the Board's discussions regarding whether to approve or reject this Consent Order and/or a Board member's participation during this process, through the Board member's review or comments, including but not limited to bias or reliance

on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision and/or final decision by the Board.

18. This Consent Order is a revocable offer of settlement, which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
19. Respondent consulted with her attorney prior to signing this Consent Order.
20. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only and is not intended to affect any civil or criminal liability or defense.
21. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

I, Donna Monticone, have read the above Consent Order, and I agree to the terms set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Donna Monticone
Donna Monticone

Subscribed and sworn to before me this 15th day of April, 2022.

STATE OF CONNECTICUT
COUNTY OF NEW HAVEN
DATE: 4/15/2022
COMMISSION EXPIRES 03/31/2025

[Signature]
Notary Public/Commissioner Superior Court

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 22nd day of April, 2022, it is hereby accepted.

Christian D. Andresen

Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented to the Connecticut Board of Examiners for Nursing on the _____ day of _____, 2022, it is hereby ordered and accepted.

BY: _____
Connecticut Board of Examiners for Nursing

CONSENT ORDER COVER SHEET

In re: Amanda K. Summa, L.P.N.

Petition No. 2022-165

1. Amanda K Summa of Watertown, Connecticut ("respondent") graduated from Lincoln Tech in 2010. She was issued license number 035492 to practice as a licensed practical nurse on July 14, 2010.
2. Respondent has no prior disciplinary history with the Department.
3. On multiple occasions in approximately 2020 and/or January 2021, respondent abused and/or used alcohol and/or marijuana to excess. From approximately 2017 to the present, respondent has and/or had one or more emotional disorders or mental illnesses ("illnesses"). Respondent's illnesses and/or abuse or excess use of alcohol or marijuana does, and/or may, affect her nursing practice.
4. The proposed Consent Order provides for a three-year probationary period that includes random alcohol/drug screens once a week for the first and third years of probation and twice monthly for the second year; therapy and employer reports monthly for the first and third years of probation and quarterly for the second year; support group meetings, and no home care, pool nursing or self-employment. There is no narcotic key restriction.
5. The Department and respondent respectfully request that the Board accept the proposed Consent Order.

CONFIDENTIALITY NOTICE: Attachments to this document may contain information that is confidential or privileged. Please do not disseminate, distribute, or copy the contents or discuss with parties who are not directly involved in this petition.

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In re: Amanda K. Summa, L.P.N.

Petition No. 2022-165

CONSENT ORDER

WHEREAS, Amanda K. Summa ("respondent") of Watertown, Connecticut, has been issued license number 035492 to practice as a licensed practical nurse by the Connecticut Department of Public Health ("the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent admits:

1. On multiple occasions in approximately 2020 and/or January 2021, respondent abused or used alcohol and/or marijuana to excess.
2. From approximately 2017 to the present, respondent has and/or had one or more emotional disorders or mental illnesses (collectively, "illnesses").
3. Respondent's illnesses and/or abuse or excess use of alcohol and/or marijuana does, and/or may, affect her practice of nursing.
4. The above-described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to:
 - a. §20-99(b)(4); and/or
 - b. §20-99(b)(5).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above-admitted violations at a hearing before the Board of Examiners for Nursing ("the Board").

Respondent agrees that for the purpose of this or any future proceedings before the Board this Consent Order shall have the same effect as if ordered after a full hearing pursuant to §§19a-9, 19a-10, and 20-99(a) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-17 and §20-99(a) of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives respondent's right to a hearing on the merits of this matter.
2. Respondent shall comply with all federal and state statutes and regulations applicable to respondent's profession.
3. Respondent's license number 035492 to practice as a licensed practical nurse in the State of Connecticut is hereby placed on probation for three (3) years, subject to the following terms and conditions:
 - A. At respondent's own expense, respondent shall engage in therapy and counseling with a Connecticut licensed therapist ("therapist") approved by the Department for the entire probationary period.
 - (1) Respondent shall provide a copy of this Consent Order to respondent's therapist.
 - (2) Respondent's therapist shall furnish written confirmation to the Department of his or her engagement in that capacity and receipt of a copy of this Consent Order within fifteen (15) days of the effective date of this Consent Order.
 - (3) If respondent's therapist determines that therapy is no longer necessary, that a reduction in frequency of therapy is warranted, or that respondent should be

transferred to another therapist, he or she shall advise the Department. Said termination of therapy, reduction in frequency of therapy, and/or respondent's transfer to another therapist shall not occur until approved by the Department. However, if therapy is terminated with approval of the Department, respondent's therapist shall continue to monitor respondent's alcohol and drug free status by monitoring and reviewing the observed random urine screens for drugs and alcohol as described in paragraph 3B below, and by providing the reports described in paragraph 3C below.

- (4) The therapist shall immediately notify the Department in writing if respondent discontinues therapy and/or terminates services.

B. Respondent shall not obtain or use controlled substances, legend drugs, marijuana or alcohol in any form unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications. Respondent shall inform said health care professional of respondent's substance abuse history.

- (1) At respondent's own expense, respondent shall submit to observed random urine screens for drugs and alcohol, in accordance with Department Requirements for Drug and Alcohol Screens, attached hereto marked as "Attachment 'A': Department Requirements for Drug and Alcohol Screens," at a testing facility approved by the Department. Laboratory reports of random alcohol and drug screens shall be submitted directly to the Department by the testing laboratory. All such observed random drug and alcohol screens shall be legally defensible in that the specimen donor and chain of custody can be identified throughout the

screening process. All laboratory reports shall indicate that the chain of custody procedure has been followed.

- (2) Respondent shall be responsible for notifying the laboratory, therapist, the Department and respondent's prescribing practitioner of any drug(s) respondent is taking. For the prescription of a controlled substance(s) for more than two consecutive weeks, the respondent shall cause the provider prescribing the controlled substance(s) to submit quarterly reports to the Department, until such time as the controlled substance(s) are not prescribed by the provider, documenting the following:
 1. A list of controlled substances prescribed by this provider for the respondent;
 2. A list of controlled substance(s) prescribed by other providers;
 3. An evaluation of the respondent's need for the controlled substance;
 4. An assessment of the respondent's continued need for the controlled substance(s).
- (3) There must be at least one such observed random alcohol/drug screen and accompanying laboratory report every week for the first and third years of probation; and at least two such screens and reports every month for the second year of probation.
- (4) There must be at least two (2) random tests for Ethylglucuronide (EtG) and accompanying laboratory reports every month for the first and third years of probation and at least (1) such random test and report every month for the remainder of the probationary period.

- (5) All screens shall be negative for the presence of drugs and alcohol. Respondent agrees that an EtG test report of EtG at a level of 1000ng/mL or higher shall be deemed to constitute a positive screen for the presence of alcohol under this Consent Order. Respondent understands and agrees that if respondent fails to submit a urine sample when requested by respondent's monitor, such missed screen shall be deemed a positive screen.
 - (6) All positive screen results shall be confirmed by gas chromatograph/mass spectrometer (GC/MS) testing.
 - (7) Respondent is hereby advised that the ingestion of poppy seeds, mouthwash and over the counter cough or cold medicines or remedies has from time to time, been raised as a defense to a positive screen result for morphine, opiates and/or alcohol and as a defense of an EtG at 1000ng/mL or higher. For that reason, respondent agrees to refrain from ingesting poppy seeds in any food substances, mouthwash and over the counter cough or cold medicines or remedies during the term of this Consent Order. In the event respondent has a positive screen for morphine, opiates and/or alcohol or if respondent's test reports an EtG at 1000ng/mL or higher, respondent agrees that the ingestion of poppy seeds and/or mouthwash and/or over the counter cough or cold medicines or remedies shall not constitute a defense to such a screen.
- C. Respondent shall be responsible for the provision of written reports from respondent's therapist directly to the Department for the entire probationary period; monthly for the first and third years of probation; and, quarterly reports for the second year of probation. Such reports shall include documentation of dates

of treatment, an evaluation of respondent's progress in treatment and of respondent's drug and alcohol-free status as established by the observed random urine screens for drugs and alcohol, an evaluation of respondent's ability to practice nursing safely and competently, and copies of all laboratory reports. A report indicating that respondent is not able to practice nursing safely and competently shall be deemed to be a violation of this Consent Order.

- D. Notwithstanding the foregoing, respondent's therapist shall immediately report to the Department any confirmed positive alcohol/drug screen and any conduct or condition on respondent's part which does or may violate any federal or state statute or regulation applicable to respondent's profession.
- E. Respondent shall provide a copy of this Consent Order to any and all employers if employed as a nurse during the probationary period. The Department shall be notified in writing by any employer(s) within fifteen (15) days of the commencement of employment, confirming receipt of a copy of this Consent Order.
- F. Respondent shall not be employed as a nurse for a personnel provider service, assisted living services agency, homemaker – home health aide agency, or home health care agency, and shall not be self-employed as a nurse for the period of probation.
- G. Respondent shall be responsible for the provision of written reports directly to the Department from respondent's nursing supervisor (i.e., Director of Nursing) monthly for the first and third years of probation; and quarterly for the second year of probation. Employer reports shall include documentation of respondent's ability to practice nursing safely and competently and shall be issued to the Department at the address cited in paragraph 3M below. A report indicating that respondent is

not practicing with reasonable skill and safety shall be deemed to be a violation of this Consent Order.

- H. During the entire probationary period, respondent shall attend "anonymous" or support group meetings at least eight to ten times per month and shall provide quarterly reports to the Department concerning respondent's record of attendance.
- I. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.
- J. Respondent shall notify the Department of any change in respondent's home or business address within fifteen (15) days of such change.
- K. If respondent pursues further training or is engaged at the time of the implementation of the Consent Order, in an educational program in any subject area that is regulated by the Department, respondent shall provide a copy of this Consent Order to the educational institution or, if not an institution, to respondent's instructor. Such institution or instructor shall notify the Department of receipt of the Consent Order within fifteen (15) days of receipt.
- L. All reports required by the terms of this Consent Order shall be due according to a schedule to be established by the Department of Public Health.
- M. All correspondence and reports shall be addressed to:

Practitioner Compliance and Monitoring Unit
Department of Public Health
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308

4. Any violation of the terms of this Consent Order without prior written approval by the Department shall constitute grounds for the Department to seek revocation of respondent's nursing license following notice and an opportunity to be heard.
5. Respondent shall pay all costs necessary to comply with this Consent Order.
6. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to take action at a later time. The Department shall not be required to grant future extensions of time or grace periods.
7. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.
8. This Consent Order is effective on the first day of the month immediately following the month in which this Consent Order is approved and accepted by the Board.
9. Respondent understands this Consent Order is a matter of public record.
10. Respondent understands and agrees that this Consent Order shall be deemed as evidence of the above-admitted violations in any proceeding before the Board in which (1) respondent's compliance with this same Consent Order is at issue, or (2) respondent's compliance with §20-99(b) of the General Statutes of Connecticut, as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank maintained by the United States Department of Health and Human Services.
11. In the event respondent violates a term of this Consent Order, respondent agrees immediately to refrain from practicing as a nurse, upon request by the Department, for a period not to exceed forty-five (45) days. During that time period, respondent further agrees to cooperate

with the Department in its investigation of the violation, and to submit to and complete a medical, psychiatric or psychological evaluation, if requested to do so by the Department; and, that the results of the evaluation shall be submitted directly to the Department. Respondent further agrees that failure to cooperate with the Department in its investigation during said forty-five (45) day period shall constitute grounds for the Department to seek a summary suspension of respondent's license. In any such summary action, respondent stipulates that failure to cooperate with the Department's investigation shall be considered by the Board and shall be given due weight by the Board in determining whether respondent's conduct constitutes a clear and immediate danger as required pursuant to Connecticut General Statutes, sections 4-182(c) and 19a-17(c). The Department and respondent understand that the Board has complete and final discretion as to whether a summary suspension is ordered.

12. If, during the period of probation, respondent practices nursing outside Connecticut, respondent shall provide written notice to the Department concerning such practice. During such time period, respondent shall not be responsible for complying with the terms of probation of this Consent Order, and such time period shall not be counted in reducing the probationary period covered by this Consent Order. Respondent may comply with the terms of probation while practicing outside Connecticut if pre-approved by the Department. In the event respondent intends to return to the practice of nursing in Connecticut, respondent shall provide the Department with thirty (30) days prior written notice and agrees to comply with all probationary terms and conditions contained in this Consent Order.
13. In the event respondent violates any term of this Consent Order, said violation may also constitute grounds for the Department to seek a summary suspension of respondent's license before the Board.

14. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent Order shall not be subject to modification as a result of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to §4-181a of the General Statutes of Connecticut without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that respondent may have under the laws of the State of Connecticut or of the United States.
15. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Board. The Department and respondent agree that the Board has complete and final discretion as to whether an executed Consent Order is approved or accepted. Respondent hereby waives any claim of error that could be raised that is related to or arises during the course of the Board's discussions regarding whether to approve or reject this Consent Order and/or a Board member's participation during this process, through the Board member's review or comments, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision and/or final decision by the Board.

16. This Consent Order is a revocable offer of settlement, which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
17. Respondent has been informed of the right to consult with an attorney at any time, including prior to signing this Consent Order.
18. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only and is not intended to affect any civil or criminal liability or defense.
19. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.


*

*

*

I, Amanda K. Summa, have read the above Consent Order, and I agree to the terms set forth therein.


I further declare the execution of this Consent Order to be my free act and deed.



Amanda K. Summa

Subscribed and sworn to before me this 6th day of April, 2022.

CARL L NEHM
NOTARY PUBLIC
CONNECTICUT
MY COMMISSION EXPIRES DEC. 31, 2025



Notary Public or person authorized
by law to administer an oath or affirmation

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 19th day of April, 2022, it is hereby accepted.



Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented to the Connecticut Board of Examiners for Nursing on the _____ day of _____, 2022, it is hereby ordered and accepted.

BY: _____
Connecticut Board of Examiners for Nursing

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Liza Paulsen, R.N.

Petition No. 2019-1389

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Liza Paulsen:

1. Liza Paulsen of Monroe, Connecticut (hereinafter "respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut registered nursing license number R34939.
2. At all relevant times, respondent was employed as a nurse at The Kennedy Center in Trumbull, Connecticut.
3. On various occasions during the course of approximately 2016 through 2019, while working as a nurse at The Kennedy Center, respondent:
 - a. illegally and/or inappropriately provided controlled substances, including Oxycontin, Percocet, and/or Adderall, to a coworker;
 - b. diverted one or more controlled substances when she, without authorization, removed controlled substances from the facility; and/or
 - c. reported to work under the influence of one or more controlled substances which may impair her ability to practice nursing safely.
4. During the course of approximately August 2019 through December 2019, while working as a nurse at The Kennedy Center, respondent sold controlled substances, including Oxycontin, to a coworker.
5. The above describe facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99(b), including but not limited to:
 - a. §20-99(b)(2); and/or
 - b. §20-99(b)(6).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by the General Statutes of Connecticut, §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Liza Paulsen as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 10th day of August 2021.



Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING

Liza Paulsen
c/o Ryan M. Scopelliti, Esq.
Zingaro & Cretella, LLC
1087 Broad Street
Bridgeport, CT 06604

VIA EMAIL (ryan@zandc-law.com)
and First Class Mail

RE: Liza Paulsen, RN - Petition No. 2019-1389

NOTICE OF HEARING

By authority of the General Statutes of Connecticut, Section 4-177, you are hereby notified to appear before the Board of Examiners for Nursing for a hearing on the attached Charges against you at 9:00 AM on **January 19, 2022**. The hearing will be held by video conference during the meeting of the Board of Examiners for Nursing. The link to connect to the hearing will be provided by email 3-5 days prior to the hearing.

These Charges are being brought against you under the provisions of the Sections 19a-9, 19a-10 and 20-99(b) of the Connecticut General Statutes. The hearing will be conducted in accordance with Chapter 54 of the General Statutes of Connecticut and Section 19a-9-1, et seq., of the Regulations of Connecticut State Agencies (Public Health Code).

At the hearing you will have the opportunity to present your evidence, including witnesses and documents. It will be your responsibility to provide the hearing connection link to any witnesses you may call.

Filing an Answer; Failure to File Answer:

You are required to file an answer to the attached Charges with the Department of Public Health within 14 days from the date of this Notice of Hearing. *Please note: failure to file an Answer could result in the allegations being found to be true as stated, and the possibility that you will not be permitted to submit any evidence concerning the allegations.*

Representation by an Attorney:

At the aforementioned hearing you may be represented by an attorney and present evidence on your behalf. Although you may represent yourself (pro se), you are urged to obtain the services of an attorney.

Documents:

If you intend to introduce documents into evidence, **YOU MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**

Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted.

The following information shall be redacted.

- (1) Date of birth
- (2) Mother's maiden name
- (3) Motor vehicle operator's license number
- (4) Social Security Number
- (5) Other government-issued identification number
- (6) Health insurance identification number
- (7) Financial account number
- (8) Security code or personal identification number (PIN)

Order Re: Filings

In preparation for this hearing you must, no later than January 5, 2022, provide the information specified in the attached Notice for Submissions.

All communications to the Board shall be submitted in this fashion. The Department or Respondent shall provide a copy of each document filed to Respondent or Department as the case may be and certify such to the Board.

Failure to Appear:

If you fail to appear at the hearing, upon proof that due notice was served upon you to appear, the Board may proceed in the same manner as though you were present in person. **The Board may hold a fact-finding meeting immediately following the close of the record.**

Please call 860-509-7566 as soon as possible if you have any questions about the hearing schedule.

Dated at Hartford, Connecticut this 27th day of September, 2021.

For the Connecticut Board of Examiners for Nursing

/s/ Jeffrey A. Kardys
Jeffrey A. Kardys, Administrative Hearings Specialist

c: Christian Andresen, Section Chief, Practitioner Licensing and Investigations
Aden Baume, Staff Attorney, Office of Legal Compliance

The Department of Public Health is an equal opportunity provider and employer.

*If you require aid/accommodation to participate fully and fairly,
please contact the Public Health Hearing Office at 860-509-7566.*

Notice for Submissions

The hearing in the matter of **Liza Paulsen, RN** has been scheduled for **January 19, 2022** and will be conducted remotely through Microsoft Teams/teleconference.

On or before **January 5, 2021**, you must provide the following by electronic mail response to the Department of Public Health, Public Health Hearing Office at phho.dph@ct.gov.

1. Electronically Pre-filed exhibits – Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted.
Parties and/or counsel should stipulate to any exhibits and facts not in dispute, and provide any objections to proposed exhibits. All exhibits also must be sent to the opposing party or counsel.
2. Witness List – identify any persons expected to be called to testify. Be sure to notify your witnesses that they will be required to remain available and in attendance for the full duration of the hearing. (This will eliminate the difficulty of trying to reach witnesses again for rebuttal or additional examination later in the hearing). Witness lists also must be sent to the opposing party or counsel.
3. Photo Identification: a copy of a government-issued photo identification of the parties and witnesses.
4. Electronic Mail (“e-mail”) addresses for parties, counsel and witnesses. All e-mail addresses must be current and able to receive all notices relating to this matter.
5. Cellphone numbers for all parties, counsel, and witnesses at which they can be reached and respond to text message during the hearing (in the event a connection is lost).
6. A statement whether executive session may be required to receive testimony containing personal protected information, and if so, what that information may be (treatment records, patient records, therapy reports). Parties or counsel should identify any witnesses listed in response to #2 above who may provide testimony relating to personal protected information requiring executive session.
7. A statement whether an interpreter will be needed for the proceeding.

This is a formal public hearing. It will be video recorded and posted on the DPH website for public viewing. All hearing participants should appear in proper attire, in proper surroundings, and remove any potential distractions.

In preparation, please make sure all of your devices are fully functioning and properly charged. All participants are required to have video and audio functions on when testifying or speaking. Our office will contact you again 3 to 5 calendar days prior to the hearing to provide you with any further instructions and a Microsoft Teams link / phone number and code to enter the hearing.

Should you have any question please contact the hearing office at phho.dph@ct.gov.

PETITION NO. 2019-1389

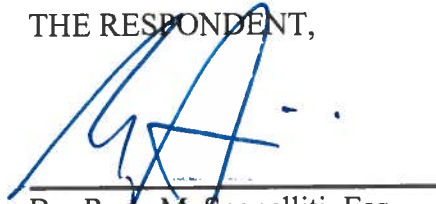
LIZA PAULSEN, RN

OCTOBER 7, 2021

ANSWER

As my client is still facing criminal charges pending in Superior Court, Bridgeport G.A. 2, she is unable to respond at this time. However, we are denying the allegations brought in the charges filed by the Department of Public Health. This is our response. In addition, we are hereby requesting a six month continuance as my client will be precluded from defending herself while criminal charges are still pending. Please respond immediately regarding this request via e-mail. Thank you.

THE RESPONDENT,



By: Ryan M. Scopelliti, Esq.
Zingaro & Cretella, LLC
1087 Broad Street
Bridgeport, Connecticut 06604
(203) 367-0442
Juris No.: 419037

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Liza Paulsen, R.N.

Petition No. 2019-1389

October 25, 2021

**DEPARTMENT'S OBJECTION TO RESPONDENT'S
REQUEST FOR A CONTINUANCE**

On October 7, Liza Paulsen, R.N., ("respondent") moved for a six-month continuance of the hearing currently scheduled in this matter before the Connecticut Board of Examiners for Nursing ("the Board") for 9:00 a.m. on January 19, 2022. Respondent argues that she is incapable of responding to this action while criminal charges are pending. The Department of Public Health ("the Department") objects to continuing the date of the hearing. The respondent failed to identify any scheduling conflicts or other preclusion which would impede defense. The allegations against respondent are serious and appropriate discipline should be imposed by the Board as soon as possible. The hearing currently scheduled for January 19, 2022 should proceed.

Respectfully submitted,

THE DEPARTMENT OF PUBLIC HEALTH

Aden T. Baume

Aden T. Baume, Staff Attorney
Office of Legal Compliance

CERTIFICATION

I certify that a copy of the foregoing was sent by email to Attorney Ryan Scopelliti (ryan@zandc-law.com) and to Jeffrey A. Kardys (jeffrey.kardys@ct.gov), Administrative Hearings Specialist in the Department's Public Health Hearing Office.

Aden T. Baume

Aden T. Baume, Staff Attorney
Office of Legal Compliance

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH



Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

November 22, 2021

Ryan M. Scopelliti, Esq.
Zingaro & Cretella, LLC
1087 Broad Street
Bridgeport, CT 06604

VIA EMAIL ONLY (ryan@zandc-law.com)

Aden Baume, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Liza Paulsen, RN - Petition No. 2019-1389

RULING ON REQUEST FOR CONTINUANCE

On October 19, 2021 counsel for respondent in the above-referenced matter filed an Answer and request for continuance of a hearing scheduled for January 19, 2022. The Department of Public Health filed an objection to the continuance request on October 25, 2021.

Respondent's request for a continuance is granted.

The hearing is rescheduled to **Wednesday, May 18, 2022**. The hearing will be held by video conference during the meeting of the Board of Examiners for Nursing.

FOR: BOARD OF EXAMINERS FOR NURSING

BY: /s/ Jeffrey A. Kardys
Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
PO Box 340308
Hartford, CT 06134-0308
Tel. (860) 509-7566 FAX (860) 707-1904



Phone: (860) 509-7566 • Fax: (860) 707-1904
Telecommunications Relay Service 7-1-1
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Hartford, Connecticut 06134-0308
www.ct.gov/dph



Affirmative Action/Equal Opportunity Employer

Notice for Submissions

The hearing in the matter of **Liza Paulsen, RN** has been scheduled for **May 18, 2022** and will be conducted remotely through Microsoft Teams/teleconference.

On or before **May 4, 2022**, you must provide the following by electronic mail response to the hearing office at poho.dph@ct.gov.

1. Electronically Pre-filed exhibits – Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted.
Parties and/or counsel should stipulate to any exhibits and facts not in dispute, and provide any objections to proposed exhibits. All exhibits also must be sent to the opposing party or counsel.
2. Witness List – identify any persons expected to be called to testify. Be sure to notify your witnesses that they will be required to remain available and in attendance for the full duration of the hearing. (This will eliminate the difficulty of trying to reach witnesses again for rebuttal or additional examination later in the hearing). Witness lists also must be sent to the opposing party or counsel.
3. Photo Identification: a copy of a government-issued photo identification of the parties and witnesses.
4. Electronic Mail (“e-mail”) addresses for parties, counsel and witnesses. All e-mail addresses must be current and able to receive all notices relating to this matter.
5. Cellphone numbers for all parties, counsel, and witnesses at which they can be reached and respond to text message during the hearing (in the event a connection is lost).
6. A statement whether executive session may be required to receive testimony containing personal protected information, and if so, what that information may be (treatment records, patient records, therapy reports). Parties or counsel should identify any witnesses listed in response to #2 above who may provide testimony relating to personal protected information requiring executive session.
7. A statement whether an interpreter will be needed for the proceeding.

This is a formal public hearing. It will be video recorded and posted on the DPH website for public viewing. All hearing participants should appear in proper attire, in proper surroundings, and remove any potential distractions.

In preparation, please make sure all of your devices are fully functioning and properly charged. All participants are required to have video and audio functions on when testifying or speaking.

Our office will contact you again 3 to 5 calendar days prior to the hearing to provide you with any further instructions and a Microsoft Teams link / phone number and code to enter the hearing.

Should you have any question please contact the hearing office at poho.dph@ct.gov.

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In Re: Sheryl Lacoursiere, APRN, RN

Petition No. 2021-1072
Petition No. 2021-1199

STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Sheryl Lacoursiere:

COUNT ONE

1. Sheryl Lacoursiere of Waterbury, Connecticut ("respondent") holds Connecticut registered nurse license number E43134 and advanced practice registered nurse license number 003861.
2. On or about August 20, 2021, September 17, 2021, and/or October 15, 2021, respondent provided nursing services for patient number one and violated the standard of care in one or more of the following ways, including, but not limited to, that she:
 - a. fell asleep, was impaired, unavailable and/or unresponsive during patient care;
 - b. failed to appropriately treat patient number one;
 - c. failed to insure patient number one's privacy and/or confidentiality;
 - d. failed to comply with HIPAA requirements;
 - e. failed to maintain appropriate patient records; and/or,
 - f. engaged in inappropriate and/or unprofessional conduct.
3. On or about September 13, 2021 and/or October 12, 2021, respondent provided nursing services for patient number two and violated the standard of care in one or more of the following ways, including, but not limited to, that she:
 - a. fell asleep, was impaired, unavailable and/or unresponsive during patient care;
 - b. failed to appropriately treat patient number two;
 - c. improperly prescribed medications;
 - d. failed to insure patient number two's privacy and/or confidentiality;
 - e. failed to comply with HIPAA requirements;
 - f. failed to properly schedule follow-up appointment(s) and/or ongoing care;

- g. failed to maintain appropriate patient records and/or,
 - h. engaged in inappropriate and/or unprofessional conduct.
4. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 (b), including, but not necessarily limited to §20-99(b)(2).

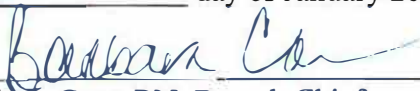
COUNT TWO

5. Paragraphs one through three are incorporated by reference as if set forth in full.
6. From approximately August 2021 through the present, respondent has or had one or more illnesses that does and/or may affect her ability to practice nursing.
7. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 (b), including, but not necessarily limited to:
- a. §20-99(b)(3); and/or
 - b. §20-99(b)(4).

THEREFORE, the Department prays:

The Connecticut Board of Examiners for Nursing as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke, or order other disciplinary action against respondent's nursing licenses as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 3rd day of January 2022.



Barbara Cass, RN, Branch Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In Re: Sheryl Lacoursiere, APRN, RN

Petition No. 2021-1072

Petition No. 2021-1199

MOTION FOR SUMMARY SUSPENSION

The Department of Public Health ("Department") moves, in accordance with Connecticut General Statutes §§4-182(c) and 19a-17(c), the Connecticut Board of Examiners for Nursing to summarily suspend respondent's Connecticut registered nurse license number E43134 and advanced practice registered nurse license number 003861. This motion is based on the attached Statement of Charges, affidavits, records and the Department's information and belief that respondent's continued nursing practice represents a clear and immediate danger to the public health and safety.

Dated at Hartford, Connecticut this 3rd day of January 2022.



Barbara Cass, RN, Branch Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

In re: Sheryl Lacoursiere, APRN, RN

Petition Nos. 2021-1072; 2021-1199

SUMMARY SUSPENSION ORDER


WHEREAS, the Department of Public Health having moved for an order of summary suspension in this matter and having submitted duly verified affidavits in support of its motion; and,

WHEREAS, said affidavits allege facts which show violations of §20-99(b) of the Connecticut General Statutes, and which imperatively require emergency action in that the public health, safety or welfare of the citizens of the State of Connecticut is in clear and immediate danger.

NOW, THEREFORE, pursuant to §4-182(c) and §19a-17(c) of the Connecticut General Statutes, it is hereby **ORDERED**, by vote of the Board of Examiners for Nursing:

1. That registered nurse license number E43134 and advanced practice registered nurse license number 003861 of Sheryl Lacoursiere to practice in the State of Connecticut, are hereby summarily suspended pending a final determination by the Board of Examiners for Nursing regarding the allegations contained in the Statement of Charges, and
2. That a hearing in this matter is scheduled for the 19th day of January 2022, at 9:00 a.m. The hearing will be held remotely via Microsoft TEAMS.

Dated at Waterbury, Connecticut this 5th day of January, 2022.



Patricia C. Bouffard, D.N.Sc., RN, Chair
Connecticut Board of Examiners for Nursing



Phone: (860) 509-7566 • Fax: (860) 707-1904
Telecommunications Relay Service 7-1-1
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dnh



STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING

Sheryl Lacoursiere
c/o Ellen M. Costello, Esq.
Del Sole & Sel Sole, LLP
46 South Whittlesey Avenue
Wallingford CT 06492-4102

VIA EMAIL (EllenC@delsoledelsole.com)

RE: Sheryl Lacoursiere, APRN, RN - Petition Nos. 2021-1072; 2021-1199

NOTICE OF HEARING

By authority of the General Statutes of Connecticut, Section 4-177, you are hereby notified to appear before the Board of Examiners for Nursing for a hearing on the attached Charges against you at 9:00 AM on **January 19, 2022**. The hearing will be held by video conference during the meeting of the Board of Examiners for Nursing. The link to connect to the hearing will be provided by email 3-5 days prior to the hearing.

These Charges are being brought against you under the provisions of the Sections 19a-9, 19a-10 and 20-99(b) of the Connecticut General Statutes. The hearing will be conducted in accordance with Chapter 54 of the General Statutes of Connecticut and Section 19a-9-1, et seq., of the Regulations of Connecticut State Agencies (Public Health Code).

At the hearing you will have the opportunity to present your evidence, including witnesses and documents. It will be your responsibility to provide the hearing connection link to any witnesses you may call.

Filing an Answer; Failure to File Answer:

You are required to file an answer to the attached Charges with the Department of Public Health *within 14 days from the date of this Notice of Hearing*. Please note: failure to file an Answer could result in the allegations being found to be true as stated, and the possibility that you will not be permitted to submit any evidence concerning the allegations.

Representation by an Attorney:

At the aforementioned hearing you may be represented by an attorney and present evidence on your behalf. Although you may represent yourself (pro se), you are urged to obtain the services of an attorney.

Documents:

If you intend to introduce documents into evidence, **YOU MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**

Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted.

The following information shall be redacted.

- (1) Date of birth
- (2) Mother's maiden name
- (3) Motor vehicle operator's license number
- (4) Social Security Number
- (5) Other government-issued identification number
- (6) Health insurance identification number
- (7) Financial account number
- (8) Security code or personal identification number (PIN)

Order Re: Filings

In preparation for this hearing you must, no later than January 12, 2022, provide the information specified in the attached Notice for Submissions.

All communications to the Board shall be submitted in this fashion. The Department or Respondent shall provide a copy of each document filed to Respondent or Department as the case may be and certify such to the Board.

Failure to Appear:

If you fail to appear at the hearing, upon proof that due notice was served upon you to appear, the Board may proceed in the same manner as though you were present in person. **The Board may hold a fact-finding meeting immediately following the close of the record.**

Please call 860-509-7566 as soon as possible if you have any questions about the hearing schedule.

Dated at Hartford, Connecticut this 5th day of January, 2022.

For the Connecticut Board of Examiners for Nursing

/s/ Jeffrey A. Kardys
Jeffrey A. Kardys, Administrative Hearings Specialist

c: Christian Andresen, Section Chief, Practitioner Licensing and Investigations
Joelle Newton, Staff Attorney, Office of Legal Compliance

Notice for Submissions

The hearing in the matter of **Sheryl Lacoursiere, APRN, RN** has been scheduled for **January 19, 2022** and will be conducted remotely through Microsoft Teams/teleconference.

On or before **January 12, 2021**, you must provide the following by electronic mail response to the Department of Public Health, Public Health Hearing Office at pgho.dph@ct.gov.

1. Electronically Pre-filed exhibits – Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted.
Parties and/or counsel should stipulate to any exhibits and facts not in dispute, and provide any objections to proposed exhibits. All exhibits also must be sent to the opposing party or counsel.
2. Witness List – identify any persons expected to be called to testify. Be sure to notify your witnesses that they will be required to remain available and in attendance for the full duration of the hearing. (This will eliminate the difficulty of trying to reach witnesses again for rebuttal or additional examination later in the hearing). Witness lists also must be sent to the opposing party or counsel.
3. Photo Identification: a copy of a government-issued photo identification of the parties and witnesses.
4. Electronic Mail (“e-mail”) addresses for parties, counsel and witnesses. All e-mail addresses must be current and able to receive all notices relating to this matter.
5. Cellphone numbers for all parties, counsel, and witnesses at which they can be reached and respond to text message during the hearing (in the event a connection is lost).
6. A statement whether executive session may be required to receive testimony containing personal protected information, and if so, what that information may be (treatment records, patient records, therapy reports). Parties or counsel should identify any witnesses listed in response to #2 above who may provide testimony relating to personal protected information requiring executive session.
7. A statement whether an interpreter will be needed for the proceeding.

This is a formal public hearing. It will be video recorded and posted on the DPH website for public viewing. All hearing participants should appear in proper attire, in proper surroundings, and remove any potential distractions.

In preparation, please make sure all of your devices are fully functioning and properly charged. All participants are required to have video and audio functions on when testifying or speaking. Our office will contact you again 3 to 5 calendar days prior to the hearing to provide you with any further instructions and a Microsoft Teams link / phone number and code to enter the hearing.

Should you have any question please contact the hearing office at pgho.dph@ct.gov.

BOARD 5

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

In Re: DPH V SHERYL LACOURSIERE, APRN
Petition No. 2021-1072


MOTION FOR CONTINUANCE OF HEARING

The Respondent, Sheryl LaCoursiere, APRN, hereby moves for a continuance of at least 30 days of the Hearing Scheduled for January 19, 2022 because the Department has just filed an Amended Statement of Charges that include two totally new Counts each including 11 and 10 subsections respectively, addressed to each patient. The Department alleges the reason for these new charges are based on the review of its new consultant expert. The Department has not provided the Respondent with a copy of the consultant's opinions to date.

Due Process requires the Respondent be given more than twenty-four hours notice of new charges. The Respondent will need to provide the new charges and the Department's consultant's report to its consultants for review and comment.

For all the foregoing reasons, the Respondent requests this motion be granted.

THE RESPONDENT,
SHERYL LACOURSIERE, APRN

BY /S/ 
ELLEN M. COSTELLO
DEL SOLE & DEL SOLE, L.L.P.
46 SOUTH WHITTLESEY AVENUE
WALLINGFORD, CT 06492
TEL: 203-284-8000
FAX: 203-284-1539
JURIS NO. 101674

CERTIFICATION

I hereby certify that a copy of the foregoing has been mailed on this, the 18th day of January, 2022:

Jeffrey A. Hardys
Administrative Hearings Specialist
State of Connecticut
Department of Public Health
Legal Office / Public Health
410 Capitol Avenue, MS 13PHO
Hartford, CT 06134
Jeffrey.kardys@ct.gov

Joelle Newton
State of Connecticut
Department of Public Health
410 Capitol Avenue
Hartford, CT 06134
Joelle.Newton@ct.gov

/s/ Ellen M. Costello
Ellen M. Costello

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH



Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

January 18, 2022

Ellen M. Costello, Esq.
Del Sole & Sel Sole, LLP
46 South Whittlesey Avenue
Wallingford CT 06492-4102

VIA EMAIL ONLY (EllenC@delsoledelsole.com)

Joelle Newton, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Sheryl Lacoursiere, APRN, RN - Petition Nos. 2021-1072; 2021-1199

RULING ON MOTION FOR CONTINUANCE

On January 18, 2022, counsel for respondent in the above-referenced matter filed a motion for continuance of a hearing scheduled for January 19, 2022. The Department of Public Health does not object to the motion.

Respondent's request for a continuance is granted.

The hearing is rescheduled to **Wednesday, February 16, 2022**. The hearing will be held remotely via Microsoft TEAMS during the meeting of the Board of Examiners for Nursing which begins at 8:30 a.m.

FOR: BOARD OF EXAMINERS FOR NURSING

BY: /s/ Jeffrey A. Kardys

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
PO Box 340308
Hartford, CT 06134-0308
Tel. (860) 509-7566 FAX (860) 707-1904



Phone: (860) 509-7566 • Fax: (860) 707-1904
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Manisha Juthani, MD
Commissioner



Ned Lamont
Governor
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Lt. Governor

BOARD OF EXAMINERS FOR NURSING

May 12, 2022

Ellen M. Costello, Esq.
Del Sole & Sel Sole, LLP
46 South Whittlesey Avenue
Wallingford CT 06492-4102

VIA EMAIL ONLY (EllenC@delsoledelsole.com)

Joelle Newton, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Sheryl Lacoursiere, APRN, RN - Petition Nos. 2021-1072; 2021-1199

NOTICE OF RESCHEDULED HEARING

The second day of hearing in the above referenced matter is scheduled for **May 18, 2022**.

The hearing will be held via Microsoft TEAMS during the meeting of the Board of Examiners for Nursing.

FOR: BOARD OF EXAMINERS FOR NURSING

/s/ *Jeffrey A. Kardys*

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
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**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In Re: Sheryl Lacoursiere, APRN, RN

Petition No. 2021-1072

Petition No. 2021-1199

January 17, 2022

MOTION TO AMEND STATEMENT OF CHARGES

The Department of Public Health ("Department") respectfully moves the Connecticut Board of Examiners for Nursing ("Board") to amend the Statement of Charges based on the following:

1. On January 3, 2022, the Department issued a Statement of Charges (attachment A).
2. On January 5, 2022, the Board summarily suspended respondent's nursing licenses.
3. Subsequently, the Department retained a consultant, Margaret Trussler-McLaughlin, RN, MS, APRN, BC, who reviewed respondent's treatment records for patient #1 and patient #2 ("patients").
4. The Department moves to amend the Statement of Charges to include additional allegations based upon the consultant's review and opinion of respondent's care of the patients.

Respectfully submitted,

THE DEPARTMENT OF PUBLIC HEALTH

Joelle C. Newton

Joelle C. Newton, Staff Attorney
Office of Legal Compliance

ORDER

The foregoing motion having been duly considered by the Connecticut Board of Examiners for Nursing, it is hereby GRANTED / ~~DENIED~~.

Dated January 19, 2022 at ^{Waterbury} ~~Hartford~~, Connecticut.

Patricia C. Bauffe, MS
Connecticut Board of Examiners for Nursing

CERTIFICATION

This certifies that on January 17, 2022 this motion was emailed to the Department of Public Health, Public Health Hearing Office, phho.dph@ct.gov and to respondent's counsel, Attorney Ellen Costello, ellenc@delsoledelsole.com.

Joelle C. Newton

Joelle C. Newton, Staff Attorney

Attachment A

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In Re: Sheryl Lacoursiere, APRN, RN

Petition No. 2021-1072

Petition No. 2021-1199

STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Sheryl Lacoursiere:

COUNT ONE

1. Sheryl Lacoursiere of Waterbury, Connecticut ("respondent") holds Connecticut registered nurse license number E43134 and advanced practice registered nurse license number 003861.
2. On or about August 20, 2021, September 17, 2021, and/or October 15, 2021, respondent provided nursing services for patient number one and violated the standard of care in one or more of the following ways, including, but not limited to, that she:
 - a. fell asleep, was impaired, unavailable and/or unresponsive during patient care;
 - b. failed to appropriately treat patient number one;
 - c. failed to insure patient number one's privacy and/or confidentiality;
 - d. failed to comply with HIPAA requirements;
 - e. failed to maintain appropriate patient records; and/or,
 - f. engaged in inappropriate and/or unprofessional conduct.
3. On or about September 13, 2021 and/or October 12, 2021, respondent provided nursing services for patient number two and violated the standard of care in one or more of the following ways, including, but not limited to, that she:
 - a. fell asleep, was impaired, unavailable and/or unresponsive during patient care;
 - b. failed to appropriately treat patient number two;
 - c. improperly prescribed medications;
 - d. failed to insure patient number two's privacy and/or confidentiality;
 - e. failed to comply with HIPAA requirements;
 - f. failed to properly schedule follow-up appointment(s) and/or ongoing care;

- g. failed to maintain appropriate patient records and/or,
 - h. engaged in inappropriate and/or unprofessional conduct.
4. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 (b), including, but not necessarily limited to §20-99(b)(2).

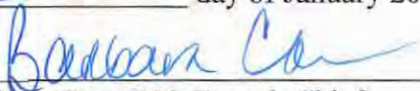
COUNT TWO

5. Paragraphs one through three are incorporated by reference as if set forth in full.
6. From approximately August 2021 through the present, respondent has or had one or more illnesses that does and/or may affect her ability to practice nursing.
7. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 (b), including, but not necessarily limited to:
- a. §20-99(b)(3); and/or
 - b. §20-99(b)(4).

THEREFORE, the Department prays:

The Connecticut Board of Examiners for Nursing as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke, or order other disciplinary action against respondent's nursing licenses as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 3rd day of January 2022.



Barbara Cass, RN, Branch Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

BOARD 9

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH**

In Re: DPH V SHERYL LACOURSIERE, APRN
Petition No. 2021-1072

RESPONDENT'S OBJECTION TO AMENDED STATEMENT OF CHARGES

On January 5, 2022, the Board of Nursing granted the Department's Motion for Summary Suspension of Dr. LaCoursiere's APRN license. The Board refused to consider Dr. LaCoursiere's treating physician's letter clearing her to return to work on the basis that it had not been received prior to the Hearing. Mr. Kardys told the Board he had not received the document from the undersigned. After the Hearing Mr. Kardys admitted he had received Respondent's email sent to him and Attorney Newton but claims Dr. Jindal's letter was not attached. The Respondent attaches a copy of the receipt of transmittal to both Attorney Newton and Mr. Kardys which indicates there was an attachment and the attachment was Dr. Jindal's letter. If there was no attachment the line under the subject line would be blank. The computer automatically picks

up and identifies if there is an attachment. (Attached as Exhibit A).

The matter was then set down for a hearing on January 19, 2022. The day before the hearing the Department sent out an amended statement of charges, that now include a whole new Count with multiple new allegations as to each complainant. The Respondent objects to these new allegations as they did not form the basis of the summary suspension.

Dr. LaCoursiere's APRN license was summary suspended based on the allegations filed on January 3, 2022. She has a right to a hearing on those allegations only, to have her license reinstated. If the Department has other new allegations they wish to pursue, those new allegations should be dealt with in the usual course of business either at another hearing or through a consent agreement should that be necessary.

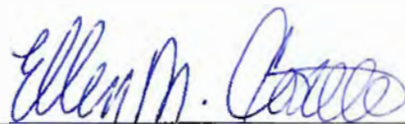
A professional license is a property right and therefore entitled to due process. Dr. LaCoursiere was not provided her due process rights in the Summary Suspension Hearing. She was only provided with the Departments Statement of Charges two days before

the Hearing and was not allowed to offer into evidence for the Board's consideration, a letter from her treating physician, indicating that she was alert and oriented and able to return to work as an APRN. Then a day before her scheduled hearing on January 19, 2022, the Department files a new Motion to Amend the Statement of Charges based on a consultants' review. The Department has failed to provide Dr. LaCoursiere with a copy of the Consultant's report.

Wherefore, Respondent requests that the Motion to Amend the Statement of Charges be denied, and the Hearing of the Summary Suspension go forward based on the original charges.

THE RESPONDENT,
SHERYL LACOURSIERE, APRN

BY /S/



ELLEN M. COSTELLO
DEL SOLE & DEL SOLE, L.L.P.
46 SOUTH WHITTLESEY AVENUE
WALLINGFORD, CT 06492
TEL: 203-284-8000
FAX: 203-284-1539
JURIS NO. 101674

The foregoing objection having been duly considered by the Board of Examiners for Nursing is hereby ~~GRANTED~~, DENIED.

Dated this 2nd day of February, 2022 at Waterbury, Connecticut.

BY: Patricia C. Ball, D.N.S.

Connecticut Board of Examiners for Nursing

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH**

In Re: Sheryl Lacoursiere, APRN, RN

Petition No. 2021-1072

Petition No. 2021-1199

AMENDED STATEMENT OF CHARGES

Pursuant to Connecticut General Statutes §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Sheryl Lacoursiere:

COUNT ONE

1. Sheryl Lacoursiere of Waterbury, Connecticut ("respondent") holds Connecticut registered nurse license number E43134 and advanced practice registered nurse license number 003861.
2. From approximately August 31, 2020 through October 15, 2021, respondent provided nursing care for patient #1 during which time respondent violated the standard of care in one or more of the following ways, in that she:
 - a. failed to fully obtain the patient's individual and/or family history;
 - b. failed to properly treat and/or assess the patient;
 - c. failed to properly formulate a treatment plan;
 - d. failed to coordinate and/or collaborate with the patient's other healthcare providers;
 - e. failed to properly obtain and review the patient's medical records from other healthcare providers;
 - f. failed to properly assess the patient's personal and/or community safety;
 - g. improperly and/or fraudulently billed for services she did not provide;
 - h. failed to maintain appropriate treatment records;
 - i. utilized an assistant without disclosing the nature of the relationship and/or failed to obtain the patient's informed consent;
 - j. failed to timely provide treatment records to the patient's subsequent healthcare provider(s) upon the patient's request, and/or,
 - k. engaged in inappropriate and/or unprofessional conduct.

3. On or about April 2, 2021, August 20, 2021, September 17, 2021, and/or October 15, 2021, respondent provided nursing services for patient #1 and violated the standard of care in one or more of the following ways, in that she:
 - a. fell asleep, was impaired, unavailable and/or unresponsive during patient care;
 - b. failed to insure the patient's privacy and/or confidentiality; and/or,
 - c. engaged in inappropriate and/or unprofessional conduct.
4. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 (b), including, but not necessarily limited to 20-99(b)(2) and/or 20-99(b)(6).

COUNT TWO

5. Paragraph one is incorporated by reference as if set forth in full.
6. On or about September 13, 2021, respondent provided nursing care for patient #2 during which time respondent violated the standard of care in one or more of the following ways, in that she:
 - a. failed to fully obtain the patient's individual and/or family history;
 - b. failed to properly treat and/or assess the patient;
 - c. failed to properly formulate a treatment plan;
 - d. failed to properly assess the patient's personal and/or community safety;
 - e. documented "No medications now-to be determined at next visit" when respondent prescribed a medication;
 - f. prescribed a medication that was inappropriate and/or contraindicated;
 - g. failed to properly manage the patient's medication regimen;
 - h. improperly and/or fraudulently billed for services she did not provide;
 - i. failed to recognize the severity of the patient's illness;
 - j. failed to refer the patient to other appropriate healthcare provider(s);
 - k. failed to maintain appropriate treatment records; and/or
 - l. engaged in inappropriate and/or unprofessional conduct.
7. On or about October 12, 2021, respondent provided nursing care for patient #2 during which time respondent violated the standard of care in one or more of the following ways, in that she:
 - a. failed to fully obtain the patient's individual and/or family history;
 - b. failed to properly treat and/or assess the patient;

- c. failed to properly formulate a treatment plan;
 - d. failed to properly assess the patient's personal and community safety;
 - e. prescribed a medication that was inappropriate and/or contraindicated;
 - f. failed to properly manage the patient's medication regimen;
 - g. improperly and/or fraudulently billed for services she did not provide;
 - h. failed to recognize the severity of the patient's illness;
 - i. failed to refer the patient to other appropriate healthcare providers; and/or,
 - j. failed to maintain appropriate treatment records.
8. On or about September 13, 2021 and/or October 12, 2021, respondent provided nursing services for patient #2 and violated the standard of care in one or more of the following ways, in that she:
- a. fell asleep, was impaired, unavailable and/or unresponsive during patient care;
 - b. failed to insure the patient's privacy and/or confidentiality; and/or,
 - c. engaged in inappropriate and/or unprofessional conduct.
9. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 (b), including, but not necessarily limited to 20-99(b)(2) and/or 20-99(b)(6).

COUNT THREE

10. Paragraphs one through nine are incorporated by reference as if set forth in full.
11. From approximately August 2021 through the present, respondent has or had one or more illnesses that does and/or may affect her ability to practice nursing.
12. The above facts constitute grounds for disciplinary action pursuant to Connecticut General Statutes §20-99 (b), including, but not necessarily limited to:
- a. §20-99(b)(3); and/or
 - b. §20-99(b)(4).

THEREFORE, the Department prays:

The Connecticut Board of Examiners for Nursing as authorized by Connecticut General Statutes §§20-99(b) and 19a-17, revoke, or order other disciplinary action against respondent's nursing licenses as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut January 17, 2022.

A handwritten signature in blue ink that reads "Christian D. Andresen". The signature is written in a cursive style and is centered above a horizontal line.

Christian D. Andresen, MPH, CPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

In Re: DPH V SHERYL LACOURSIERE, APRN, RN
Petition No. 2021-1072
Petition No. 2021-1199

RESPONDENT'S ANSWER TO AMENDED STATEMENT OF CHARGES

The Respondent hereby respond to the Amended Statement of Charges in the following fashion:

COUNT ONE:

1. Admitted.
2. Denied.
3. Denied.
4. Denied.

COUNT TWO:

5. Denied.
6. Denied.
7. Denied.
8. Denied.
9. Denied.

COUNT THREE:

10. Denied.

11. Denied.

12. Denied.

THE RESPONDENT,
SHERYL LACOURSIERE APRN, RN

BY /S/



ELLEN M. COSTELLO
DEL SOLE & DEL SOLE, L.L.P.
46 SOUTH WHITTLESEY AVENUE
WALLINGFORD, CT 06492
TEL: 203-284-8000
FAX: 203-284-1539
JURIS NO. 101674

CERTIFICATION

I hereby certify that a copy of the foregoing has been mailed on this, the 10TH day of May 2022:

Joelle C. Newton, Staff Attorney
Office of Legal Compliance
Department of Public Health / State of Connecticut
410 Capitol Avenue
P.O. Box 340308
Hartford, CT 06134-0308
Joelle.Newton@ct.gov

Jeffrey A. Kardys, Administrative Hearings Specialist
State of Connecticut
Department of Public Health
410 Capitol Avenue - MS# 12 HSR
Hartford, CT 06134
Jeffrey.kardys@ct.gov

/s/ 
Ellen M. Costello

Ellen M. Costello

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH

In re: Olesja Whelan, R.N.

Petition No. 2020-336

STATEMENT OF CHARGES

Pursuant to the General Statutes of Connecticut, §§19a-10 and 19a-14, the Department of Public Health (hereinafter "the Department") brings the following charges against Olesja Whelan:

1. Olesja Whelan of Stamford, Connecticut (hereinafter "respondent") is, and has been at all times referenced in this Statement of Charges, the holder of Connecticut registered nurse license number 112029.
2. At all relevant times, respondent was employed as a nurse at a facility in New York.
3. On or about November 27, 2019, respondent appeared at work in an impaired state.
4. In or before November 2019, respondent abused or utilized to excess alcohol.
5. Respondent's abuse or excess use of alcohol does, and/or may, affect her practice as a nurse.
6. The above facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-99, including but not limited to §20-99(b)(2) and/or 20-99(b)(5).

THEREFORE, the Department prays that:

The Connecticut Board of Examiners for Nursing, as authorized by the General Statutes of Connecticut, §§20-99(b) and 19a-17, revoke or order other disciplinary action against the license of Olesja Whelan as it deems appropriate and consistent with law.

Dated at Hartford, Connecticut this 10th day of August, 2021.



Christian D. Andresen, MPH, Section Chief
Practitioner Licensing & Investigations Section
Healthcare Quality and Safety Branch

STATE OF CONNECTICUT
CONNECTICUT BOARD OF EXAMINERS FOR NURSING

Olesja Whelan
c/o Ellen M. Costello, Esq.
Del Sole & Sel Sole, LLP
46 South Whittlesey Avenue
Wallingford CT 06492-4102

VIA EMAIL (EllenC@delsoledelsole.com)
and First Class Mail

RE: Olesja Whelan, RN - Petition No. 2020-336

NOTICE OF HEARING

By authority of the General Statutes of Connecticut, Section 4-177, you are hereby notified to appear before the Board of Examiners for Nursing for a hearing on the attached Charges against you at 9:00 AM on **January 19, 2022**. The hearing will be held by video conference during the meeting of the Board of Examiners for Nursing. The link to connect to the hearing will be provided by email 3-5 days prior to the hearing.

These Charges are being brought against you under the provisions of the Sections 19a-9, 19a-10 and 20-99(b) of the Connecticut General Statutes. The hearing will be conducted in accordance with Chapter 54 of the General Statutes of Connecticut and Section 19a-9-1, et seq., of the Regulations of Connecticut State Agencies (Public Health Code).

At the hearing you will have the opportunity to present your evidence, including witnesses and documents. It will be your responsibility to provide the hearing connection link to any witnesses you may call.

Filing an Answer; Failure to File Answer:

You are required to file an answer to the attached Charges with the Department of Public Health within 14 days from the date of this Notice of Hearing. *Please note: failure to file an Answer could result in the allegations being found to be true as stated, and the possibility that you will not be permitted to submit any evidence concerning the allegations.*

Representation by an Attorney:

At the aforementioned hearing you may be represented by an attorney and present evidence on your behalf. Although you may represent yourself (pro se), you are urged to obtain the services of an attorney.

Documents:

If you intend to introduce documents into evidence, **YOU MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:**

Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted.

The following information shall be redacted.

- (1) Date of birth
- (2) Mother's maiden name
- (3) Motor vehicle operator's license number
- (4) Social Security Number
- (5) Other government-issued identification number
- (6) Health insurance identification number
- (7) Financial account number
- (8) Security code or personal identification number (PIN)

Order Re: Filings

In preparation for this hearing you must, no later than January 5, 2022, provide the information specified in the attached Notice for Submissions.

All communications to the Board shall be submitted in this fashion. The Department or Respondent shall provide a copy of each document filed to Respondent or Department as the case may be and certify such to the Board.

Failure to Appear:

If you fail to appear at the hearing, upon proof that due notice was served upon you to appear, the Board may proceed in the same manner as though you were present in person. **The Board may hold a fact-finding meeting immediately following the close of the record.**

Please call 860-509-7566 as soon as possible if you have any questions about the hearing schedule.

Dated at Hartford, Connecticut this 27th day of September, 2021.

For the Connecticut Board of Examiners for Nursing

/s/ Jeffrey A. Kardys
Jeffrey A. Kardys, Administrative Hearings Specialist

c: Christian Andresen, Section Chief, Practitioner Licensing and Investigations
Linda Fazzina, Staff Attorney, Office of Legal Compliance

The Department of Public Health is an equal opportunity provider and employer.

*If you require aid/accommodation to participate fully and fairly,
please contact the Public Health Hearing Office at 860-509-7566.*

Notice for Submissions

The hearing in the matter of **Olesja Whelan, RN** has been scheduled for **January 19, 2022** and will be conducted remotely through Microsoft Teams/teleconference.

On or before **January 5, 2021**, you must provide the following by electronic mail response to the Department of Public Health, Public Health Hearing Office at phho.dph@ct.gov.

1. Electronically Pre-filed exhibits – Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted.
Parties and/or counsel should stipulate to any exhibits and facts not in dispute, and provide any objections to proposed exhibits. All exhibits also must be sent to the opposing party or counsel.
2. Witness List – identify any persons expected to be called to testify. Be sure to notify your witnesses that they will be required to remain available and in attendance for the full duration of the hearing. (This will eliminate the difficulty of trying to reach witnesses again for rebuttal or additional examination later in the hearing). Witness lists also must be sent to the opposing party or counsel.
3. Photo Identification: a copy of a government-issued photo identification of the parties and witnesses.
4. Electronic Mail (“e-mail”) addresses for parties, counsel and witnesses. All e-mail addresses must be current and able to receive all notices relating to this matter.
5. Cellphone numbers for all parties, counsel, and witnesses at which they can be reached and respond to text message during the hearing (in the event a connection is lost).
6. A statement whether executive session may be required to receive testimony containing personal protected information, and if so, what that information may be (treatment records, patient records, therapy reports). Parties or counsel should identify any witnesses listed in response to #2 above who may provide testimony relating to personal protected information requiring executive session.
7. A statement whether an interpreter will be needed for the proceeding.

This is a formal public hearing. It will be video recorded and posted on the DPH website for public viewing. All hearing participants should appear in proper attire, in proper surroundings, and remove any potential distractions.

In preparation, please make sure all of your devices are fully functioning and properly charged. All participants are required to have video and audio functions on when testifying or speaking. Our office will contact you again 3 to 5 calendar days prior to the hearing to provide you with any further instructions and a Microsoft Teams link / phone number and code to enter the hearing.

Should you have any question please contact the hearing office at phho.dph@ct.gov.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

Board Exh. 3

Manisha Juthani, MD
Commissioner



Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

December 30, 2021

Olesja Whelan
c/o Ellen M. Costello, Esq.
Del Sole & Sel Sole, LLP
46 South Whittlesey Avenue
Wallingford CT 06492-4102

VIA EMAIL ONLY (EllenC@delsoledelsole.com)

Linda Fazzina, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340380
Hartford, CT 06134-0308

VIA EMAIL ONLY (linda.fazzina@ct.gov)

RE: Olesja Whelan, RN - Petition No. 2020-336

NOTICE OF RESCHEDULED HEARING

The hearing in the above referenced matter scheduled for January 19, 2022 is continued to **February 16, 2022**.

The hearing will be held via Microsoft TEAMS during the meeting of the Board of Examiners for Nursing.

In preparation for this hearing you must, no later than February 2, 2022, provide the information specified in the attached Notice for Submissions.

FOR: BOARD OF EXAMINERS FOR NURSING

/s/ *Jeffrey A. Kardys*

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
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Affirmative Action/Equal Opportunity Employer



Notice for Submissions

The hearing in the matter of **Olesja Whelan, RN**, has been rescheduled to **February 16, 2022** and will be conducted remotely through Microsoft Teams/teleconference.

On or before **February 2, 2022**, you must provide the following by electronic mail response to the Department of Public Health, Public Health Hearing Office at phho.dph@ct.gov

1. Electronically Pre-filed exhibits – Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted. *Parties and/or counsel should stipulate to any exhibits and facts not in dispute, and provide any objections to proposed exhibits.* All exhibits also must be sent to the opposing party or counsel.
2. Witness List – identify any persons expected to be called to testify. Be sure to notify your witnesses that they will be required to remain available and in attendance for the full duration of the hearing. (This will eliminate the difficulty of trying to reach witnesses again for rebuttal or additional examination later in the hearing). Witness lists also must be sent to the opposing party or counsel.
3. Photo Identification: a copy of a government-issued photo identification of the parties and witnesses.
4. Electronic Mail (“e-mail”) addresses for parties, counsel and witnesses. All e-mail addresses must be current and able to receive all notices relating to this matter.
5. Cellphone numbers for all parties, counsel, and witnesses at which they can be reached and respond to text message during the hearing (in the event a connection is lost).
6. A statement whether executive session may be required to receive testimony containing personal protected information, and if so, what that information may be (treatment records, patient records, therapy reports). Parties or counsel should identify any witnesses listed in response to #2 above who may provide testimony relating to personal protected information requiring executive session.
7. A statement whether an interpreter will be needed for the proceeding.

This is a formal public hearing. It will be video recorded and posted on the DPH website for public viewing. All hearing participants should appear in proper attire, in proper surroundings, and remove any potential distractions.

In preparation, please make sure all of your devices are fully functioning and properly charged. All participants are required to have video and audio functions on when testifying or speaking. Our office will contact you again 3 to 5 calendar days prior to the hearing to provide you with any further instructions and a Microsoft Teams link / phone number and code to enter the hearing.

Should you have any question please contact the hearing office at phho.dph@ct.gov.

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Manisha Juthani, MD
Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

February 3, 2022

Ellen M. Costello, Esq.
Del Sole & Sel Sole, LLP
46 South Whittlesey Avenue
Wallingford CT 06492-4102

VIA EMAIL ONLY (EllenC@delsoledelsole.com)

Linda Fazzina, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340380
Hartford, CT 06134-0308

VIA EMAIL ONLY (linda.fazzina@ct.gov)

RE: Olesja Whelan, RN - Petition No. 2020-336

NOTICE OF RESCHEDULED HEARING

The hearing in the above referenced matter scheduled for February 16, 2022 is continued to **March 2, 2022**.

The hearing will be held via Microsoft TEAMS during the meeting of the Board of Examiners for Nursing.

FOR: BOARD OF EXAMINERS FOR NURSING

/s/ *Jeffrey A. Kardys*

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
PO Box 340308
Hartford, CT 06134-0308
Tel. (860) 509-7566 FAX (860) 707-1904



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Affirmative Action/Equal Opportunity Employer



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Board Exh. 5

Manisha Juthani, MD
Commissioner



Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

BOARD OF EXAMINERS FOR NURSING

March 7, 2022

Olesja Whelan
c/o Ellen M. Costello, Esq.
Del Sole & Sel Sole, LLP
46 South Whittlesey Avenue
Wallingford CT 06492-4102

VIA EMAIL ONLY (EllenC@delsoledelsole.com)

Linda Fazzina, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340380
Hartford, CT 06134-0308

VIA EMAIL ONLY (linda.fazzina@ct.gov)

RE: Olesja Whelan, RN - Petition No. 2020-336

NOTICE OF RESCHEDULED HEARING

The hearing in the above referenced matter is continued to **May 18, 2022**.

The hearing will be held via Microsoft TEAMS during the meeting of the Board of Examiners for Nursing.

In preparation for this hearing you must, no later than May 4, 2022, provide the information specified in the attached Notice for Submissions.

FOR: BOARD OF EXAMINERS FOR NURSING

/s/ *Jeffrey A. Kardys*

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
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Affirmative Action/Equal Opportunity Employer



Notice for Submissions

The hearing in the matter of **Olesja Whelan, RN**, has been rescheduled to **May 18, 2022** and will be conducted remotely through Microsoft Teams/teleconference.

On or before **May 4, 2022**, you must provide the following by electronic mail response to the Department of Public Health, Public Health Hearing Office at poho.dph@ct.gov

1. Electronically Pre-filed exhibits – Exhibits should be pre-marked for identification (i.e. Department exhibit 1, Respondent exhibit A), page numbered, and properly redacted. *Parties and/or counsel should stipulate to any exhibits and facts not in dispute, and provide any objections to proposed exhibits.* All exhibits also must be sent to the opposing party or counsel.
2. Witness List – identify any persons expected to be called to testify. Be sure to notify your witnesses that they will be required to remain available and in attendance for the full duration of the hearing. (This will eliminate the difficulty of trying to reach witnesses again for rebuttal or additional examination later in the hearing). Witness lists also must be sent to the opposing party or counsel.
3. Photo Identification: a copy of a government-issued photo identification of the parties and witnesses.
4. Electronic Mail (“e-mail”) addresses for parties, counsel and witnesses. All e-mail addresses must be current and able to receive all notices relating to this matter.
5. Cellphone numbers for all parties, counsel, and witnesses at which they can be reached and respond to text message during the hearing (in the event a connection is lost).
6. A statement whether executive session may be required to receive testimony containing personal protected information, and if so, what that information may be (treatment records, patient records, therapy reports). Parties or counsel should identify any witnesses listed in response to #2 above who may provide testimony relating to personal protected information requiring executive session.
7. A statement whether an interpreter will be needed for the proceeding.

This is a formal public hearing. It will be video recorded and posted on the DPH website for public viewing. All hearing participants should appear in proper attire, in proper surroundings, and remove any potential distractions.

In preparation, please make sure all of your devices are fully functioning and properly charged. All participants are required to have video and audio functions on when testifying or speaking. Our office will contact you again 3 to 5 calendar days prior to the hearing to provide you with any further instructions and a Microsoft Teams link / phone number and code to enter the hearing.

Should you have any question please contact the hearing office at poho.dph@ct.gov.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

In Re: DPH V OLESJA WHELAN, R.N.
Petition No. 2020-336

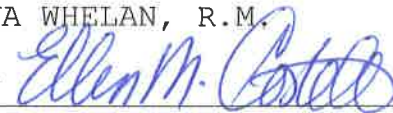
RESPONDENT'S ANSWER TO DRAFT STATEMENT OF CHARGES

The Respondent hereby responds to the Draft Statement of Charges in the following fashion:

1. Admitted.
2. Admitted.
3. Denied.
4. Denied.
5. Denied.
6. Denied.

THE RESPONDENT
OLESJA WHELAN, R.M.

BY/S/



ELLEN M. COSTELLO
DEL SOLE & DEL SOLE, LLP
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JURIS NO. 101674
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CERTIFICATION

I hereby certify that a copy of the foregoing has been sent via electronic mail and/or via facsimile on this 23rd day of February 2022 to the following:

Jeffrey A. Kardys, Administrative Hearings Specialist
State of Connecticut
Department of Public Health
410 Capitol Avenue - MS# 12HSR
Hartford, CT 06134
Jeffrey.kardys@ct.gov

Linda Fazzina, Staff Attorney, Office of Legal Compliance
State of Connecticut
Department of Public Health
410 Capitol Avenue
Hartford, CT 06134
Linda.Fazzina@ct.gov.

/s/ 
Ellen M. Costello

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH**

In Re: DPH V OLESJA WHELAN, R.N.
Petition No. 2020-336

**OBJECTION TO THE DEPARTMENT OF HEALTH'S EXHIBITS OF DOCUMENTS
FROM HAVEN AND RECORDS OBTAINED FROM OTHER SOURCES BY HAVEN**

The Respondent objects to the Departments' exhibits which the Respondent believes were obtained illegally and without her consent.

Respondent had an incident prior to work in NY. Her employer in NY never filed a report of the incident nor did anyone report her to the nursing board in NY or to NY PAP. Respondent did a confidential self-report to NYPAP.

Respondent was advised she could call HAVEN anonymously, to ask questions. However, when she called, she was pressured by HAVEN to give her name before they would answer her questions. The Respondent asserts that HAVEN thereafter coerced her into signing their enrollment documents. She never signed the final documents with HAVEN, nor did she pay HAVEN any money for enrollment. After feeling coerced into signing, she called HAVEN

and revoked all consents and documents signed and indicated she did not want to participate in HAVEN.

HAVEN had no authority to contact NYPAP and request and obtain records from them. HAVEN also had no statutory authority to turn the illegally obtained protected medical records over to the Department of Public Health. Substance abuse treatment records are protected by both state and federal law. See, 42 C.F.R. §§ 2.63. Neither the Board of Nursing nor the Department is authorized to order the release of substance abuse treatment records, nor was HAVEN authorized to obtain the release of them. The Department of Public had no statutory authority to receive, and review said documents and then to disseminate them to the Board of Nursing and others.

If medical records were obtained by illegal means under Connecticut or Federal laws which in this case they were, then those illegally obtained records cannot be utilized by the Department in any manner and cannot be released to the Board of Nursing in this matter.

The Department's statement of charges is solely based on these illegally obtained treatment records. This is an incident that happened in NY with no charges in NY. The Department takes the position that the discharge treatment report submitted by the Respondent should be precluded as it does not constitute her entire treatment record under C.G.S. § 4-177c(a)(2) and under prior Board Rulings Fenn/Olsen. The illegally obtained records submitted by the Department fail to meet this standard as well. They are partial records which do not allow for the Respondent to do an adequate cross-examination.

For all the above reasons, the Respondent requests that her objection to the Exhibits of the Department be sustained.

THE RESPONDENT
OLESJA WHELAN, R.N.

BY/S/



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CERTIFICATION

I hereby certify that a copy of the foregoing has been sent via electronic mail and/or via facsimile on this 28TH day of February 2022 to the following:

Jeffrey A. Kardys, Administrative Hearings Specialist
State of Connecticut
Department of Public Health
410 Capitol Avenue - MS# 12HSR
Hartford, CT 06134
Jeffrey.kardys@ct.gov

Linda Fazzina, Staff Attorney, Office of Legal Compliance
State of Connecticut
Department of Public Health
410 Capitol Avenue
Hartford, CT 06134
Linda.Fazzina@ct.gov.


/s/ Ellen M. Costello
Ellen M. Costello

Kardys, Jeffrey

From: Fazzina, Linda
Sent: Friday, February 25, 2022 2:09 PM
To: Kardys, Jeffrey
Cc: Ellen Costello
Subject: Olesja Whelan, RN; Petition No. 2020-336

Mr. Kardys,

As requested in your email yesterday indicating that counsel for the Board of Examiners for Nursing (“the Board”) has requested that the parties submit their objections in writing to the proposed exhibits in the referenced matter, the Department objects to respondent’s proposed Exhibits A through D as follows:

The Statement of Charges involves allegations of: (1) impairment while respondent was working as a nurse at a New York facility, on or about November 27, 2019; and (2) abuse or excess use of alcohol in or before November 2019 that does, and/or may, affect respondent’s nursing practice. Connecticut General Statutes Section 4-178 allows the Board to receive **relevant and material** documentary evidence (emphasis added). Moreover, the Board has previously ruled that it will not accept as evidence a respondent’s partial treatment records, in part, because it would unduly limit the rights of cross-examination of the Board and the Department pursuant to Connecticut General Statutes Section 4-177c(a)(2). See for example, prior Board rulings commonly known as Fenn/Olsen.

Respondent’s proposed Exhibit A consists of four (4) pages of records from a program respondent attended at Greenwich Hospital Yale New Haven Health’s Addiction Recovery Unit (“Greenwich Program”) and respondent’s proposed Exhibit D consists of what appears to be five (5) pages of non-forensic urine screen records associated with respondent’s participation in the Greenwich Program. Respondent’s proposed Exhibits A and D should not be admitted as full exhibits, as they are only partial records of the treatment respondent received at the Greenwich Program. Noticeably missing are records such as an intake evaluation, progress notes, and a discharge summary from the outpatient program. The Board should be able to review the entire record of respondent’s treatment in the Greenwich Program, not portions of the record selected by respondent, to evaluate this petition and determine an appropriate remedy to protect the public health. In addition, the Department should be able to examine respondent on information contained in the entire treatment record, including, without limitation, the extent and history of respondent’s substance abuse.

Respondent’s proposed Exhibit B appears to contain four (4) pages, each labeled “Quarterly Practice Liaison Report” and are irrelevant and immaterial to the issues of impairment at work, on or about November 27, 2019, or abuse or excessive use of alcohol in or before November 2019. Moreover, three of the four pages appear to be duplicate copies, all signed by the same person on February 3, 2022. Allowing respondent’s proposed Exhibit B as a full exhibit will also create collateral issues not relevant to the statement of charges in this matter, including, but not limited to the reason

the reports were created, the relationship between respondent and the individual(s) signing the report, the reporting period purportedly covered by each report, and why the reports are being submitted on a quarterly basis to respondent's counsel.

Respondent's proposed Exhibit C appears to contain seven (7) pages (the index states eight pages, but the undersigned has only received seven pages) of character reference letters, from respondent's co-workers at Stamford Hospital where respondent has apparently been working after the time alleged in the statement of charges . These character references are irrelevant and immaterial to the issues in this matter and should be excluded from the record.

For the reasons stated above, respondent's proposed Exhibits A through D should not be entered into the hearing record as full exhibits.

Respectfully submitted,

Linda Fazzina, Staff Attorney

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