10-R19756

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

March 12, 2008

Nancy Gustafson, RN
75 B Imlay Street
Hartford, CT 06105

Re: Consent Order
Petition No. 2006-0720-010-059
License No. R19756

Dear Ms. Gustafson:

Please accept this letter as notice that you have satisfied the terms of your license probation, effective March 1, 2008.

Notice will be sent to the Department's Licensure and Registration section to remove all restrictions from your license related to the above-referenced Consent Order.

Please be certain to retain this letter as documented proof that you have completed your license probation.

Very truly yours,

Bonnie Pinkerton

Bonnie Pinkerton, RN, Nurse Consultant
Practitioner Licensing and Investigations Section

cc: J. Filippone
J. Wojick

Phone: (860) 509-7400
Telephone Device for the Deaf (860) 509-7191
410 Capitol Avenue - MS # 12HSR
P.O. Box 340308 Hartford, CT 06134
An Equal Opportunity Employer

10-R19756

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE SYSTEMS BRANCH

In Re: Nancy J. Gustafson, R.N. Petition No. 2006-0720-010-059

CONSENT ORDER

WHEREAS, Nancy Gustafson (hereinafter "respondent") of Hartford, Connecticut has been issued license number R19756 to practice as a registered nurse by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent hereby admits and acknowledges that:

1. Respondent, a registered nurse, was employed as the Director of Clinical Services at Mosaic, an agency that administers twenty group homes for approximately 100 clients of the Department of Mental Retardation. Respondent was responsible for four group homes and the other group homes were divided with the three nurses that respondent supervised.
2. The group homes are operated by unlicensed staff and are attended to at various times by the assigned nurse.
3. On February 17, 2006 through February 19, 2006 respondent was the on-call nurse for Glendale House.
4. On February 18, 2006 respondent was telephoned by a staff member of Glendale House informing her that resident #1 had vomited a dark red mixture of fluid and that there was a bright pink pool of liquid between her legs. She was also told that several hours later that resident #1 had a dark red spot "about the size of a hand" on her pillow which seemed to be

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coming from her right nostril and mouth and that her tongue was also coated with dried dark red material.

5. Respondent ordered fluids and instructed staff to call her if another episode occurred.
6. On or about February 21, 2006, resident #1 was found cyanotic and unresponsive by the group home staff and was later pronounced dead.
7. Respondent failed to examine, evaluate and assess resident #1 when she exhibited a change of condition and failed to notify the resident's physician of her changed condition. Respondent also relied on data gathered by unlicensed group home staff to evaluate and assess resident #1 and to determine a plan of care.
8. The above described 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).

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above allegations at a hearing in front of the Board of Examiners for Nursing (hereinafter "the Board"). Respondent further agrees that 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 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 her profession.

3. Respondent's license number R19756 to practice as a registered nurse in the State of Connecticut is hereby reprimanded and placed on probation for one year, subject to the following terms and conditions:

   A. Respondent shall provide a copy of this Consent Order to all current and future employers for the duration of her probation.

   B. Respondent shall be responsible for the provision of written reports directly to the Board and the Department from her nursing supervisor (i.e., Director of Nursing) quarterly for the entire period of probation. Respondent shall provide a copy of this Consent Order to any and all employers if employed as a nurse during the probationary period. The Board and the Department shall be notified in writing by any employer(s) within fifteen (15) days of the commencement of employment as to the receipt of a copy of this Consent Order. Employer reports shall include documentation of respondent's ability to safely and competently practice nursing and shall be issued to the Board and the Department at the address cited in paragraph 3H below.

   C. Respondent shall notify the Board and the Department in writing of any change of employment within fifteen (15) days of such change.

   D. Respondent shall notify the Board and the Department of any change in her home or business address within fifteen (15) days of such change.

   E. Within the first six months of the probationary period, respondent shall attend and successfully complete coursework pre-approved by the Department on the following:

      - Nursing Process and Critical Thinking Skills,

- Assessment and Care of the Patient with Hematemesis,
- Assessment and Care of the Patient with Hemoptysis,
- Assessment and Care of the Patient with Hyperthermia, and
- Assessment and Care of the Patient with Epistaxis.

Within fifteen days of the completion of each course, respondent shall provide the Department with proof, to the Department's satisfaction, of the successful completion of each course.

F. 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.

G. 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.

H. All correspondence and reports shall be addressed to:

Bonnie Pinkerton
Department of Public Health
Practitioner Licensing and Investigations
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 Board shall constitute grounds for the Department to seek revocation of respondent's nursing license following notice and an opportunity to be heard.

5. 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 action at a later time. The Board shall not be required to grant future extensions of time or grace periods.

6. Legal notice of any action shall be deemed sufficient if sent to respondent's last known address of record reported to Practitioner Licensing and Investigations Section of the Healthcare Systems Branch of the Department.

7. 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.

8. Respondent understands this Consent Order is a matter of public record.

9. Respondent understands this Consent Order may be considered 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 §20-99(b) of the General Statutes of Connecticut, as amended, is at issue.

10. In the event respondent violates a term of this Consent Order, respondent agrees immediately to refrain from practicing as a registered nurse, upon request by the Department, with notice to the Board, for a period not to exceed 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 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.

11. 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.

12. 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. 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.

13. 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 understand that the Board has complete and final discretion as to whether an executed Consent Order is approved or accepted.

14. 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.

15. Respondent has had the opportunity to consult with an attorney prior to signing this document.

16. 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 Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.

I, Nancy J. Gustafson, 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.

Nancy J. Gustafson, R.N.

Subscribed and sworn to before me this 4th day of January, 2007

Judith L. Wolfson
Notary Public
My commission expires July 31, 2011

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 11th day of January, 2007, it is hereby accepted.

Jennifer Filippone, Section Chief,
Practitioner Licensing and Investigations
Healthcare Systems Branch

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners for Nursing on the 7 day of February, 2007, it is hereby ordered and accepted.

BY: _____
Connecticut Board of Examiners for Nursing