

**.STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE SYSTEMS BRANCH**

In Re: Deborah L. DeCarlo, L.P.N.

Petition No. 2008-1222-011-064

CONSENT ORDER

WHEREAS, Deborah L. DeCarlo (hereinafter "respondent") of Meriden, Connecticut has been issued license number 025795 to practice as a licensed practical nurse by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, the Department alleges that:

1. On November 16, 2008, while working at Connecticut Baptist Home in Meriden, CT, respondent failed to fully inspect each card during a narcotic count at the beginning of her shift. In addition, during said shift, she left her medication cart unlocked and unattended, for approximately twenty (20) minutes while she attended to a patient, as well as during breaks. At the end of said shift, ten (10) Percocet tablets were determined to be missing from her medication cart during a change of shift controlled drug audit.
2. 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 does not admit to having violated any statute or regulation, including but not limited to §20-99(b) of the General Statutes of Connecticut. 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 025795 to practice as a licensed practical nurse in the State of Connecticut is hereby placed on probation for one (1) year, subject to the following terms and conditions:
 - A. Respondent shall attend and successfully complete a course in medication administration, including the management of controlled substances, pre-approved by the Department. Within thirty (30) days of the

completion of such coursework, respondent shall provide the Department with proof, to the Department's satisfaction, of the successful completion of such course.

- B. Respondent shall not obtain or use controlled substances, legend drugs or alcohol in any form unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications.
- (1) At her own expense, she 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, as ordered by her therapist and/or personal physician. Laboratory reports of random alcohol and drug screens shall be submitted directly to the Board and 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, her therapist and/or personal physician, the Board, the Department and her prescribing practitioner of any drug(s) she 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 Board and 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 (1) such observed random alcohol/drug screen and accompanying laboratory report every month for the entire probationary period.
 - (4) All screens shall be negative for the presence of drugs and alcohol.
 - (5) All positive screen results shall be confirmed by gas chromatograph/mass spectrometer (GC/MS) testing.
 - (6) Respondent is hereby advised that the ingestion of poppy seeds and mouthwash has, from time to time, been raised as a defense to a positive screen result for morphine, opiates and/or alcohol. For that reason, respondent agrees to refrain from ingesting poppy seeds in any food substances or mouthwash during the term of this Consent Order. In the event respondent has a positive screen for morphine, opiates and/or alcohol, respondent agrees that the ingestion of poppy seeds and/or mouthwash shall not constitute a defense to such a screen.

- C. Respondent shall provide a copy of this Consent Order to all current and future employers for the duration of her probation.
- D. 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 her probation. Respondent represents and warrants that as of the date of her execution of this Consent order, she works as a nurse for Pediatric Services of America, Inc. (hereinafter, “PSA”) and has been assigned to provide care, since in or about November 2008, to a family with children who have Hunter’s Syndrome. Notwithstanding the restrictions on nursing employment in the first sentence of this paragraph 3D, the Department agrees that respondent can continue to be employed in her current assignment with PSA with the following restrictions:
- 1) Respondent’s registered nursing supervisor must monitor and perform a monthly review of respondent’s records for her current assignment, including, without limitation, a review of the medication administration record and controlled substance disposition record to verify that all narcotics have been appropriately ordered, maintained and administered for each patient in the home. Respondent shall fully cooperate with her supervisor in providing such monitoring. Respondent shall be responsible for the provision of written reports directly to the Board and the Department from her registered nurse supervisor at PSA monthly and comply with all requirements set forth in subsection E, below.
 - 2) During the period of probation, the Department shall pre-approve each change of respondent’s employment within the nursing profession, including, without limitation, any change of assignment with PSA.
- E. 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) monthly for the entire probationary period. 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 3J below.
- F. Respondent shall notify the Board and the Department in writing of any change of employment within fifteen (15) days of such change.
- G. Respondent shall notify the Board and the Department of any change in her home or business address within fifteen (15) days of such change.
- H. If respondent pursues further training or is engaged at the time of 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.

- I. 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.
- J. 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 the 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. The Department's allegations as contained in this Consent Order shall be deemed true in any subsequent proceeding before the Board in which (1) her compliance with this same order is at issue, or (2) her 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, except for a civil penalty, shall be reported to the National Practitioner Data Bank.
- 10. In the event respondent violates a term of this Consent Order, respondent agrees immediately to refrain from practicing as a licensed practical 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 is not employed 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 understands 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.
12. If, during the period of probation, respondent practices nursing outside Connecticut, she shall provide written notice to the Department concerning such employment. 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 terms and conditions contained in paragraph 3 above.
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. 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 understand that the Board has complete and final discretion as to whether an executed Consent Order is approved or accepted.

- 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 had the opportunity to consult with an attorney prior to signing this document.
- 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 Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau. 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, Deborah L. DeCarlo, 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.

Deborah L. DeCarlo
Deborah L. DeCarlo

Subscribed and sworn to before me this 12th day of May, ~~2009~~ 2010.

Christine Z. Robarge
Notary Public or person authorized
by law to administer an oath or affirmation
CHRISTINE Z. ROBARGE
NOTARY PUBLIC
STATE OF CONNECTICUT
My Commission Expires April 30, 2013

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 14th day of May, ~~2009~~ 2010, it is hereby accepted.

Jennifer Filippone
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 2nd day of June, ~~2009~~ 2010, it is hereby ordered and accepted.

BY: Patricia C. Bufford
Connecticut Board of Examiners for Nursing



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

July 7, 2011

Deborah DeCarlo, LPN
158 Chamberlain Hwy.
Meriden, CT 06451

Re: Consent Order
Petition No. 2008-1222-011-064
License No. 025795

Dear Ms. DeCarlo:

Please accept this letter as notice that you have satisfied the terms of your license probation, effective July 1, 2011.

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 a copy of this letter as documented proof that you have completed your license probation.

Thank you for your cooperation during this process, and good luck to you in the future.

Very truly yours,

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

cc: J. Filippone
J. Wojick



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