STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
BUREAU OF REGULATORY SERVICES

In re: Jaimar Malcolm Brown Petition No. 2000-0703-000-071

PRELICENSURE CONSENT ORDER

WHEREAS, Jaimar Malcolm Brown of New London, Connecticut (hereinafter "respondent") has applied for licensure to practice as a hairdresser/cosmetician by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 387 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent agrees that:

1. The Department has at no time issued respondent a license to practice the occupation of hairdressing/cosmetology under the General Statutes of Connecticut, Chapter 387.
2. In March 1999, respondent was found guilty of the sale of hallucinogens/narcotics, which constitutes a felony under the laws of this state.
3. Respondent is currently serving probation with the Connecticut Judicial Department, Office of Adult Probation, for such conviction and the probation shall be in effect until October 19, 2002.
4. The conduct described above constitutes grounds for the denial of respondent's application for licensure pursuant to §19a-14 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-14 of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives the right to a hearing on the merits of his application for licensure.

2. After satisfying the requirements for licensure as a hairdresser/cosmetician as set forth in Chapter 387 of the General Statutes of Connecticut, respondent's license to practice as a hairdresser/cosmetician will be issued.

3. Respondent's license to practice as a hairdresser/cosmetician in the State of Connecticut shall, immediately upon issuance, be placed on probation. The probation shall run coterminous with the Connecticut Judicial Department's probation, and shall conclude at such time as he concludes his probation with the Connecticut Judicial Department. The probationary period for his hairdressing/cosmetology license shall be under the following terms and conditions:

   a) During the probationary period of his hairdressing/cosmetology license, respondent shall report to the Department any arrest(s). Such report shall occur within fifteen (15) days of such event.

   b) Respondent shall provide a copy of this Consent Order to his probation officer. Said probation officer shall furnish written confirmation to the Department of his receipt of a copy of this Consent Order within fifteen (15) days of the effective date of this Consent Order. Said probation officer shall notify the Department immediately if respondent fails to maintain compliance with the terms of probation or incurs any subsequent arrests.

   c) Respondent shall provide a copy of this Consent Order to his employer and/or designated supervisor at each place where respondent practices as a hairdresser/cosmetician throughout his probationary period with a copy of this Consent Order within fifteen (15) days of its effective date, or within fifteen (15) days of commencement of employment at a new facility. Said employer and/or designated supervisor shall furnish written confirmation to the Department of his/her receipt of this Consent Order within fifteen (15) days of receipt. If respondent is not practicing with reasonable skill and safety, the employer and/or designated supervisor shall immediately notify the Department.

d) Respondent shall participate in regularly scheduled therapy at his own expense with a licensed psychiatrist or psychologist/social worker/marriage and family therapist pre-approved by the Department (hereinafter "therapist").

(1) Respondent shall provide a copy of this Consent Order to his 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 the therapist determines that therapy is no longer necessary, that a reduction in frequency of therapy sessions is warranted, or that respondent should be transferred to another therapist, the therapist shall advise the Department, and the Department shall pre-approve said termination of therapy, reduction in frequency of therapy sessions, and/or respondent's transfer to another therapist.

(4) The therapist shall submit reports monthly for the year of probation; quarterly for the duration of probation, which shall address, but not necessarily be limited to, respondent's ability to practice hairdressing/cosmetology in an alcohol and substance free state safely and competently. Said reports shall continue until the therapist determines that therapy is no longer necessary or the period of probation has terminated.

(5) The therapist shall immediately notify the Department in writing if the therapist believes respondent's continued practice poses a danger to the public, or if respondent discontinues therapy and/or terminates his or her services.

e) Respondent shall refrain from the ingestion of alcohol in any form and the ingestion, inhalation, injection or other use of any controlled substance and/or legend drug unless prescribed or recommended for a legitimate therapeutic purpose by a licensed health care professional authorized to prescribe medications. In the event a medical condition arises

requiring treatment utilizing controlled substances, legend drugs, or alcohol in any form, respondent shall notify the Department and, upon request, provide such written documentation of the treatment as is deemed necessary by the Department.

(1) During the first year of the probationary period, respondent shall submit to monthly random observed urine screens for alcohol, controlled substances, and legend drugs; during the remaining probationary period, he shall submit to such screens on a quarterly basis. Respondent shall submit to such screens on a more frequent basis if requested to do so by the therapist or the Department. Said screens shall be administered by a facility approved by the Department. All such random screens shall be legally defensible in that the specimen donor and chain of custody shall be identified throughout the screening process. All laboratory reports shall state that the chain of custody procedure has been followed.

(2) Respondent shall cause to have the facility provide monthly reports to the Department on the urine screens for alcohol, controlled substances and legend drugs. All such screens shall be negative for alcohol, controlled substances, and legend drugs, except for medications prescribed by respondent's physician. If respondent has a positive urine screen, the facility shall immediately notify the Department. All positive random drug and alcohol screens shall be confirmed by gas chromatograph/mass spectrometer testing.

(3) Respondent understands and agrees that if he fails to submit a urine sample when requested by his monitor, such missed screen shall be deemed a positive screen.

(4) Respondent shall notify each of his health care professionals of all medications prescribed for him by any and all other health care professionals.

(5) 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, and 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.

f) Respondent shall notify the Department within fifteen (15) days of his completion of probation with the Connecticut Judicial Department.

4. Respondent shall comply with all state and federal statutes and regulations applicable to his license.
5. Respondent shall notify the Department of any change(s) in his employment within fifteen (15) days of such change.
6. Respondent shall notify the Department of any change(s) in his home and/or business address within fifteen (15) days of such change.
7. Any deviation from the term(s) of this Prelicensure Consent Order without prior written approval of the Department shall constitute a violation. A violation of any term(s) of this Prelicensure Consent Order shall result in the right of the Department in its discretion to immediately deem respondent's hairdressing/cosmetology license rescinded. 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. Notice of the recision of the license shall be sent by the Department to respondent's address of record. Respondent waives any right to a hearing on the issue of violation of the terms of this Prelicensure Consent Order.
8. That correspondence and reports required by the terms of this Prelicensure Consent Order are to be addressed to:

Richard Goldman, Paralegal Specialist
Department of Public Health
Division of Health Systems Regulation
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, Connecticut 06134-0308

9. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Health Systems Regulation of the Department.
10. Respondent understands that this Prelicensure Consent Order may be considered as evidence of the above-admitted violations in any proceeding before the Connecticut Examining Board for Barbers, Hairdressers and Cosmeticians in which (1) his compliance with this Prelicensure Consent Order is at issue, or (2) his compliance with §20-263 of the Connecticut General Statutes, as amended, is at issue.
11. This Prelicensure 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 Prelicensure 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 she may have under the laws of the State of Connecticut or of the United States.
12. This Prelicensure 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.
13. This Prelicensure Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
14. Respondent understands this Prelicensure Consent Order is a matter of public record.

15. Respondent understands he has the right to consult with an attorney prior to signing this Prelicensure Consent Order.

I, Jaimar Malcolm Brown have read the above Prelicensure Consent Order, and I agree to the terms and allegations set forth therein. I further declare the execution of this Prelicensure Consent Order to be my free act and deed.

Jaimar Malcolm Brown

Subscribed and sworn to before me this 17 day of July 2000.

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

ROBIN L. HARRIS
NOTARY PUBLIC
MY COMMISSION EXPIRES DEC. 31, 2002

The above Prelicensure Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 20th day of July _____ 2000, it is hereby ordered and accepted.

Kathleen Zarrella, Director
Division of Health Systems Regulation

jlk

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

April 16, 2003

Jaimar M. Brown, H/C
27 Sunset Street
New London, CT 06320

Re: Prelicensure Consent Order
Petition No. 2000-0703-000-071
License No. 050465
[redacted]

Dear Mr. Brown:

Please accept this letter as notice that you have satisfied the terms of your license probation, effective October 19, 2002.

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

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

Thank you for your cooperation during this process.

Very truly yours,

Bonnie Pinkerton

Bonnie Pinkerton, RNC
Division of Health Systems Regulation

cc: J. Filippone

Phone: (860) 509-7400
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