

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
BUREAU OF REGULATORY SERVICES

In re: Nelson Bayron, L.C.S.W.

Petition No. 960404-058-001

CONSENT ORDER

WHEREAS, Nelson Bayron, L.C.S.W. of Plantsville, Connecticut (hereinafter "respondent") has been issued license number 000416 to practice social work by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 383b of the Connecticut General Statutes, as amended; and,

WHEREAS, the Department alleges that:

1. Respondent acted negligently, incompetently or wrongfully in the course of professional activities in that he engaged in a sexual relationship with an adult patient.
2. The above described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-195p.

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest the above allegations of wrongdoing and agrees that for purposes of this or any future proceedings before the Department, this Consent Order shall have the same effect as if proven and ordered after a full hearing held pursuant to §§19a-10, 19a-14 and 20-195p of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §§19a-17 and 20-195p of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. That he waives his right to a hearing on the merits of this matter.
2. Respondent's license is hereby suspended for a period of two (2) years, with said suspension immediately stayed.
3. That his license shall be placed on probation for a period of two (2) years under the following terms and conditions:
 - a. Respondent shall participate in regularly scheduled therapy at his own expense with a licensed psychologist pre-approved by the Department and experienced in working with professionals having characterological problems (hereinafter "therapist").
 - (1) Respondent shall provide a copy of this Consent Order, as well as a copy of the psychological evaluation of Michael N. Fulco, Ph.D. (the "psychological evaluation"), to his therapist.
 - (2) Respondent's therapist shall furnish written confirmation to the Department of his engagement in that capacity and receipt of a copy of this Consent Order and the psychological evaluation within thirty (30) 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 quarterly reports to the Department addressing, but not necessarily limited to, respondent's ability to practice as a social worker safely and competently (with particular reference to those concerns raised in the psychological evaluation). Said reports shall continue until the therapist determines that therapy is no longer necessary or the period of probation has expired.
 - (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.
- b. The Department shall pre-approve respondent's practice and/or employment. Respondent shall also obtain written approval from the Department prior to any change in his employment or independent practice as a social worker during the probationary period.
 - c. Respondent's employer, partner and/or associate at any hospital, clinic, partnership and/or association at which he is employed or with which he is affiliated shall be provided with a copy of this Consent Order within fifteen (15) days of his accepting such position. Each such employer, partner and/or associate shall furnish written confirmation to the Department of receipt of a copy of this Consent Order within thirty (30) days of respondent's employment.
 - d. After respondent has received written approval concerning his practice and/or employment as a social worker from the Department as required in paragraph 3b above, respondent shall obtain at his own expense, the services of a social worker, licensed and

practicing in the State of Connecticut and pre-approved by the Department (hereinafter "supervisor"), to supervise respondent's practice as more particularly set forth below:

- (1) During the period of probation, respondent shall obtain releases from all patients in his practice permitting him to record (by either audio recording or process recording at the discretion of supervisor) their sessions and review the transcripts of such sessions in face to face consultation with his supervisor.
- (2) Respondent will provide his supervisor with a list of all his cases updated on a monthly basis. Respondent's supervisor shall meet with respondent as frequently as necessary to complete a review of at least ten (10) cases a month selected at the discretion of the supervisor. In no event shall the supervisor meet with respondent less than once per month.
- (3) The supervisor shall monitor respondent's practice by reviewing patient records, reviewing transcripts of respondent and patient dialogue, and by any other reasonable means which he or she deems appropriate. Respondent shall fully cooperate with the supervisor in providing such monitoring.
- (4) If at any time during the probationary period, the supervisor concludes that respondent cannot safely practice, he or she shall immediately notify the Department of his or her assessment, and such a finding shall constitute a violation of this Consent Order.
- (5) Respondent shall be responsible for providing written supervisor reports directly to the Department on a monthly basis for the period of probation. Such supervisor's reports shall include documentation of dates and duration of meetings with respondent, number and a general description of the patient

records reviewed, additional monitoring techniques utilized, and statement that respondent is practicing with reasonable skill and safety.

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

Bonnie Pinkerton, Nurse Consultant
Department of Public Health
410 Capitol Avenue, MS #12LEG
P.O. Box 340308
Hartford, CT 06134-0308

5. All reports required by the terms of this Consent Order shall be due according to the following schedule:
- a. Monthly reports shall be due on the tenth business day of each month.
 - b. Quarterly reports shall be due the tenth business day of every third month.
6. Respondent shall comply with all state and federal statutes and regulations applicable to his licensure.
7. Respondent shall pay all costs necessary to comply with this Consent Order.
8. Respondent understands that this Consent Order is a matter of public record.
9. Any alleged violation of any provision of this Consent Order, may result in the following procedures at the discretion of the Department:
- a. The Department shall notify respondent in writing by first-class mail that the term(s) of this Consent Order have been violated, provided that no prior written consent for deviation from said term(s) has been granted.
 - b. Said notification shall include the acts or omission(s) which violate the term(s) of this Consent Order.
 - c. Respondent shall be allowed fifteen (15) days from the date of the mailing of notification required in paragraph 9a above to demonstrate to the satisfaction of the

Department that he has complied with the terms of this Consent Order or, in the alternative, that he has cured the violation in question.

- d. If respondent does not demonstrate compliance or cure the violation by the limited fifteen (15) day date certain contained in the notification of violation to the satisfaction of the Department, he shall be entitled to a hearing before the Department which shall make a final determination of the disciplinary action to be taken.
- e. Evidence presented to the Department by either the Department or respondent in any such hearing shall be limited to the alleged violation(s) of the term(s) of this Consent Order.

10. In the event respondent violates any term of this Consent Order, respondent agrees immediately to refrain from practicing as a social worker, upon request by the Department, 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 and/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 his failure to cooperate with the Department's investigation shall constitute an admission that his conduct constitutes a clear and immediate danger as required pursuant to the General Statutes of Connecticut, sections 4-182(c) and 19a-17(c).

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 his license before the Board.
12. Respondent shall provide written notice to the Department in the event he is unemployed as a social worker for periods of thirty (30) days or longer, or is employed as a social worker less than (20) hours per week, or is employed outside of the State of Connecticut. Such period(s) of time shall not be counted in reducing the probationary period covered by this Consent Order.
13. 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.
14. This Consent Order is effective on the first day of the month immediately following the date this Consent Order is accepted and ordered by the Department.
15. Respondent agrees that the Department's allegations as contained in this Consent Order shall be deemed true in any subsequent proceeding before the Department in which (1) his compliance with this Consent Order is at issue, or (2) his compliance with §20-195p of the General Statutes of Connecticut, as amended, is at issue.
16. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department from taking action at a later time. The Department shall not be required to grant future extensions of time or grace periods.
17. 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 Order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the General Statutes of

Connecticut, provided that this stipulation shall not deprive respondent of any rights that he may have under the laws of the State of Connecticut or of the United States.

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 the right to consult with an attorney prior to signing this document.

I, Nelson Bayron, L. C. S.W., have read the above Consent Order, and I stipulate and agree to the terms as set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Nelson Bayron
Nelson Bayron, L.C.S.W.

Subscribed and sworn to before me this 4th day of June 1997.

[Signature]
~~Notary Public~~ or person authorized Commissioner, Superior Court
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 20th day of June 1997, it is hereby accepted.

[Signature]
Stanley K. Peck, Director
Legal Office



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

July 6, 1999

Nelson Bayron, LCSW
44 Gallant Drive
Plantsville, CT 06479

Re: Consent Order
Petition No. 960404-058-001
License No. 000416
Date of Birth: ~~01/01/1957~~
Completion of Probation

Dear Mr. Bayron:

Please be advised that the probationary terms of the above-referenced Consent Order have been satisfied, effective July 1, 1999.

Notice will be sent to the Department's Licensure and Registration section to remove all restrictions on License No. 000416 related to the above-referenced Consent Order.

Sincerely,

Richard Goldman
Paralegal Specialist II
Division of Health Systems Regulation

cc: Debra Tomassone, PHSM
Bonnie Pinkerton, RNC



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