STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE SYSTEMS BRANCH

In re: Tracy A. Will, L.C.S.W. Petition No. 2007-0822-058-010

CONSENT ORDER

WHEREAS, Tracy A. Will of Ashford (hereinafter "respondent") has been issued license number 005754 to practice clinical social work by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 383b of the General Statutes of Connecticut, as amended; and,

WHEREAS, the Department alleges that:

1. At all relevant times respondent worked as a clinical social worker in solo practice in Ashford, Connecticut (hereinafter "the practice"). From February 2006 through March 2006 respondent treated male patient, M.B. as part of the practice. Respondent had an inappropriate personal and sexual relationship with M.B. from April 2006 through July 2006.
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 but, while admitting no guilt or wrongdoing, agrees that for purposes of this or any future proceedings before a Hearing Officer (hereinafter "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-14, 19a-17 and 20-195p 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's license shall be suspended for a period of three (3) months. All three originals of respondent's license shall be provided to the Department within ten days of the effective date of this Order.

3. Following said suspension, respondent's license shall be placed on probation for a period of three (3) years under the following terms and conditions:

   a. Respondent shall participate in regularly scheduled therapy at her own expense with a licensed or certified therapist, pre-approved by the Department (hereinafter "therapist").

      (1) Respondent shall provide a copy of this Consent Order to her 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 quarterly for the duration of the probationary period, which shall address, but not necessarily be limited to, respondent's ability to practice clinical social work 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.

b. During the period of probation, respondent shall only practice clinical social work in an office and practice setting that includes other clinical social workers.

c. Respondent shall obtain at her own expense, the services of a clinical social worker, pre-approved by the Department (hereinafter "supervisor"), to conduct a quarterly random review of twenty percent (20%) or twenty (20) of respondent's patient records, whichever is the larger number. In the event respondent has twenty (20) or fewer patients, the supervisor shall review all of respondent's patient records.

(1) Respondent shall provide a copy of this Consent Order to his practice supervisor. Respondent's supervisor 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.

(2) Respondent's supervisor shall conduct such review and meet with her not less than once every month for the duration of her probationary period.

(3) The supervisor shall have the right to monitor respondent's practice by any other reasonable means which he or she deems appropriate. Respondent shall fully cooperate with the supervisor in providing such monitoring.

(4) Respondent shall be responsible for providing written supervisor reports directly to the Department quarterly for the duration of the probationary

period. Such supervisor's reports shall include documentation of dates and duration of meetings with respondent, number and a general description of the patient records and patient medication orders and prescriptions reviewed, additional monitoring techniques utilized, and statement that respondent is practicing with reasonable skill and safety.

d. During the probationary period, respondent shall attend and successfully complete a course in professional boundaries, pre-approved by the Department. Within one (1) month of the completion of such coursework, respondent shall provide the Department with proof, to the Department's satisfaction, of the successful completion of such courses.

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

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

5. 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.

6. Respondent shall comply with all state and federal statutes and regulations applicable to her licensure.

7. Respondent shall pay all costs necessary to comply with this Consent Order.

8. 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 8a above to demonstrate to the satisfaction of the Department that she has complied with the terms of this Consent Order or, in the alternative, that she has cured the violation in question.

d. If respondent does not demonstrate compliance or cure the violation within the fifteen (15) days specified in the notification of violation to the satisfaction of the Department, she 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.

9. In the event respondent is not employed as a clinical social worker 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 clinical social work, respondent shall provide the Department with thirty (30) days prior written notice. Respondent shall not return to the practice of clinical social work 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. If requested to do so by the Department, respondent further agrees to complete the following:

a. submit to and complete a psychiatric/psychological evaluation by a provider pre-approved by the Department. The results of such evaluation shall be submitted directly to the Department.

b. execute releases for any records requested by the Department including, but not limited to, psychiatric/psychological care, employment records, treatment and disability records and/or professional assistance program records. For purposes of this document, psychiatric/psychological care includes any substance and/or alcohol abuse treatment.

c. Respondent understands that any return to the practice of clinical social work without pre-approval from the Department shall constitute a violation of this Consent Order and may subject the respondent to further disciplinary action.

10. If, during the period of probation, respondent practices clinical social work 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 clinical social work in Connecticut, respondent agrees to comply with all terms and conditions contained in paragraph 3 above.

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 her license before the Department.

12. Legal notice shall be 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.

13. 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.

14. Respondent agrees that this Consent Order shall be deemed a public document, and the Department's allegations as contained in this Consent Order shall be deemed true in any subsequent proceeding before the Department in which her compliance with this Consent Order or with §20-195p 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.

15. In the event respondent violates a term of this Consent Order, respondent agrees immediately to refrain from practicing as a clinical 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 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 Department and shall, as a matter of law, constitute 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 Department has complete and final discretion as to whether a summary suspension is ordered.

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 she 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 permits a representative of the Legal Office of the Healthcare Systems Branch to present this Consent Order and the factual basis for this Consent Order to the Department. Respondent understands that the Department has complete and final discretion as to whether this executed Consent Order is approved or accepted.

20. Respondent understands and agrees that she is responsible for satisfying all of the terms of this Consent Order during vacations and other periods in which she is away from her residence.

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

22. 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.

23. 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, Tracy A. Will, 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.

Tracy A. Will, LCSW

Tracy A. Will, L.C.S.W.

Subscribed and sworn to before me this 29th day of September 2009.

Cynthia Narci

MY COMMISSION EXPIRES 10/24/2011

Notary Public or person authorized Cynthia Narci
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 5th day of October 2009, it is hereby accepted.

Jennifer Filippone

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

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

February 1, 2010

Tracy A. Will, LCSW
436 Turnpike Road
Ashford, CT 06278

Re: Consent Order
Petition No. 200~~0~~7-0822-058-010
License No. 0057~~1~~54

Dear Ms. Will:

Please accept this letter as notice that your license suspension has ended, effective February 1, 2010. Your license probation continues until February 1, 2013.

Thank you for your ongoing cooperation in this process.

Respectfully,

Olive Tronchin, HPA
Practitioner Licensing and Investigation Section

C: **Jennifer Fillippone**

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