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CERTIFICATION BOARD

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Jeff Pearty, MPA, Executive Director

November 7, 1997

Re: Complaint #9707
Complainant: Roxann Johnson
Respondent: Shirley C. Mueller, CADC III, CCS II

To: Board of Directors
Wisconsin Certification Board, Inc.

The Executive Committee having received the results of the investigation into the alleged misconduct of Shirley C. Mueller, CADC III, CCS II and in conformity with its rules now makes the following:

FINDINGS OF FACT

1. The respondent was under WCB jurisdiction at the time of the alleged offenses identified in the complaint.
2. The complainant filed a complaint under the WCB counselor *Code of Conduct* (Rev. 1996).
3. On April 8, 1997 the respondent was terminated from employment at Beloit Inner City (BIC), Beloit, WI.
4. Respondent lost attempts to gain Wisconsin Unemployment Compensation (UC).
5. On April 9, 1997, the respondent contacted WCB staff and stated: "Roxanne Johnson asked me to resign. It was my fault. 51.42 clients were to be given U.As [Urine analyses] by the evening staff. I documented that they were negative. The screens were not given. We billed for the U.A.s' that didn't occur. It wasn't deliberate."
6. On 8/7/97 during an in-person interview and while her attorney was present, the respondent provided direct testimony in addition to written information. The respondent adhered to her response and reasserted her position about the method of her documentation of urinalysis testing at her former employer, Beloit Inner City (BIC). During her tenure at BIC, the respondent continued to claim that she asked coworkers to complete drug screens on her clients. The respondent expected them to be completed; and she documented the drug screens and their results within her clients' medical records without the receipt of the results from the laboratory completing the testing.
7. The respondent stipulated that:
 - a. drug screens did not occur with eight of her probation and parole clients;
 - b. she erred in placing a positive drug screen result in one of her client's records which was one of the eight records identified in which no drug screen was actually taken;
 - c. she provided a form to BIC that identified services allegedly rendered to the respondent's clients;
 - d. she wrote the BIC drug screening policy and understood the drug screen procedure at BIC which included the placement of the "hard copy" of the laboratory results in the medical record;
 - e. she identified her own handwriting on a laboratory form that showed the results of an alleged drug screen on one of her clients. However, according to BIC on the date written by the respondent, no drug screen was taken on the client indicated on the form.
 - f. The respondent provided no documentation or testimony to support any efforts to seek confirmation from her coworkers or the laboratory that the drug screens she requested on her clients were completed.
8. An excerpt from one of the respondent's written statement stated: "General practice of the day was to ask counselor to take a UA & I then would enter - UA given with date in client's file. When a UA fax results wasn't returned to me within a few days, I would entry negative UA. I did this because I had a large caseload & did do short cut. This is poor paper work & not a good procedure....Because of all I do, I cut a corner and this is the issue."

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9. During the respondent's UC hearing, she identified coworkers whom she asked to complete drug screens on her clients in March of 1997. However, these same coworkers denied being asked to complete drug screens for the respondent.
10. The respondent gave this writer a copy of her supervisee's evaluation form. This same form was used as evidence for the respondent at her UC hearing.
11. The respondent does not admit to performing any unethical behaviors that would breach the *Codes of Conduct*.

CONCLUSION

Regarding the administration and the results of drug screens that had not transpired while at BIC, the respondent developed and adhered to a pattern of entering incorrect and false information into the progress notes of her 51.42 clients whom she counseled and had case management responsibilities.

The respondent seems to lack insight into the severity of her longstanding behavior of documenting invalid information into the medical records of clients. The respondent demonstrated a lack of responsibility not only to her clients, but also to her clients' families and significant others, referents, the respondent's agency coworkers, and third party payers.

The respondent lacked adherence to the acceptable standards of the AODA counseling profession. The respondent knew or should have known that:

- a. she engaged in conduct which did not meet the generally accepted standards of practice to the AODA profession;
- b. submitting information of client services rendered or allegedly rendered to the billing clerk at BIC would generate billing to third party payers; and
- c. documenting invalid information into the medical records of agency clients created the potential for harming not only those clients but also the public at large.

Therefore, respondent breached the following Rules of Conduct within the WCB counselor *Code of Conduct* (Rev 1996):

Rule 2.2 -- A counselor shall not engage in conduct which does not meet the generally accepted standards of practice.

Rule 5.1 -- A counselor shall not:

- a. present or cause to be presented a false or fraudulent claim, or any proof in support of such claim, to be paid under any contract or certificate of insurance; and
- b. prepare, make or subscribe to a false or fraudulent account, certificate, affidavit, proof of loss or other document or writing, with knowledge that the same may be presented or used in support of a claim for payment under a policy of insurance.

Rule 5.5 -- A counselor shall not sign or issue in the counselor's professional capacity a document or a statement that the counselor knows or should have known to contain a false or misleading statement.

Rule 8.1 -- A counselor shall not falsify, amend, knowingly make incorrect entries, or fail to make timely essential entries into the client/patient record.

DECISION

Pursuant to Section V(A)(3), of the WCB counselor *Code of Conduct* (Rev. 1996) Action by the Executive Committee, Shirley C. Mueller's certification as a Certified Alcohol/Drug Counselor III (CADC III) is hereby placed on Suspension for a period of one year.

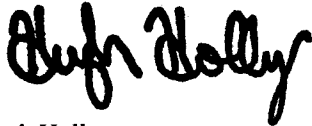
Consequently, Shirley C. Mueller's certification as a Certified Clinical Supervisor II (CCS II) is also suspended for the duration of her CADC III suspension.

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In addition, Shirley C. Mueller is required to obtain and provide verifiable documentation of twenty-four (24) hours of Ethics and Client Rights education and training prior to the reinstatement of the respondent's CADC III and CCS II certifications.

Please be advised of your rights to appeal, hearing, and reinstatement as outlined within Sections VI and VII of the counselor *Code of Conduct* (Rev. 1996).

Sincerely,

A handwritten signature in black ink, appearing to read "Hugh Holly". The signature is written in a cursive, flowing style.

Hugh Holly
President
Executive Committee
Wisconsin Certification Board, Inc.

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