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IN THE MATTER OF THE LICENSE OF

Beth E. Rataczak, Petitioner

ORDER GRANTING REINSTATEMENT OF LIMITED LICENSE LS0003031NUR

Beth E. Rataczak 827 ½ E. Cook St. Portage, WI 53901

On Thursday, September 16, 2004, the Board of Nursing considered the petitioner's request for a reinstatement of her Wisconsin nursing license. Based upon all information of record herein, the Board orders as follows:

ORDER

NOW, THEREFORE, IT IS ORDERED that the petition of Beth E. Rataczak, RN (license #59424) for a reinstatement her license to practice as a Registered Nurse in the state of Wisconsin is at this time is GRANTED, subject to the following terms, conditions and limitations.

Practice restrictions

- 1. Petitioner shall practice only in pre-approved work settings and where she works under direct supervision. "Direct supervision" means "immediate availability to continually coordinate, direct and inspect at first hand the practice of another."
- 2. Petitioner shall not practice as a nurse in home care, agency or pool nursing, or for an emergency staffing agency.
- 3. Respondent shall not practice behavioral health nursing.

Required therapy

- 4. Respondent shall maintain successful participation in all components of a program of psychotherapy. Treatment shall be provided by a mental health practitioner acceptable to the Board. Respondent must attend therapy on a schedule as recommended by her mental health practitioner; the Board, however, reserves the right to set a minium schedule of treatment of at least one (1) therapy session per month.
- 5. Respondent shall provide and keep on file with all applicable treatment providers and facilities current releases which comply with state and federal laws authorizing release of all of Respondent's medical and treatment records and reports. In addition, these releases shall (if applicable) permit her treating physicians and therapists to disclose and discuss the progress of her treatment and rehabilitation with the Board of Nursing or any member thereof, or with any employee of the Department of Regulation and Licensing acting under the authority of the Board of Nursing. Copies of these releases shall be filed simultaneously with the Department Monitor.

Required reporting/ disclosure

- 6. Petitioner shall arrange for submission of quarterly reports satisfactory to the Board from her nursing employer(s) reporting the terms and conditions of her employment and evaluating her work performance. These reports shall be submitted to the Department Monitor in the Department of Regulation and Licensing Division of Enforcement.
- 7. Petitioner shall notify the Department Monitor of any change of nursing employment during the time in which the Order is in effect. Notification shall occur within fifteen (15) days of a change of employment and shall include an explanation of the

reasons for the change.

- 8. Respondent's mental health care provider shall submit formal written reports to the Department Monitor in the Department of Regulation and Licensing, Division of Enforcement, PO Box 8935, Madison, Wisconsin 53708-8935 on a quarterly basis, as directed by the Department Monitor. These reports shall assess Respondent's compliance with and progress in therapy. Respondent's health care provider shall report *immediately* to the Department Monitor any violation or suspected violation of the Board's Final Decision and Order.
- 9. Respondent shall furnish a copy of this Order to all nursing employers, including any prospective employer when respondent applies for employment as a health care provider.

Department Monitor

10. The Department Monitor is the individual designated by the Board as its agent to coordinate compliance with the terms of this Order, including receiving reports and coordinating all requests for approval of education or other petitions. The Department Monitor may be reached as follows:

Department Monitor
Division of Enforcement
PO Box 8935
Madison, WI 53708-8935
Tel. (608) 261-3817
FAX (608) 266-2264

Petition for Termination of restrictions

- 11. Respondent may petition the Board for modification of the terms of this limited license at any time following one [1] year from the date of this Order. Any such petition shall be accompanied by written recommendations from Respondent's employer and her therapist expressly supporting the specific modifications sought. Denial of the petition in whole or in part shall not be considered a denial of a license within the meaning of Sec. 227.01(3)(a), Stats. and Respondent shall not have a right to any further hearings or proceedings on any denial in whole or in part of the petition for modification of the limited license
- 12. Upon completion of: two [2] years of complete, successful and continuous compliance with the terms of this limitation that includes two [2] years of nursing employment under the terms of this Order; Petitioner may petition the Board to revise or eliminate any of the above conditions.

SUMMARY SUSPENSION

13. If Respondent fails to fully and completely comply with all terms and conditions set forth above or if the Department receives a subsequent credible allegation against Respondent of violation of this Order, the Department Monitor shall without further notice or hearing issue an Order summarily suspending Petitioner's license. Respondent may thereafter petition for a hearing to show cause pursuant to the procedures set forth in Wis. Admin. Code RL Ch. 6.09. The Board in its discretion may in the alternative impose additional conditions and limitations or other additional discipline for a violation of any of the terms of this Order.

Effective date of Order

14. This Order shall become effective upon the date of its signing.

BOARD OF NURSING

Jacqueline Johnsrud On behalf of the Board 9-21-04 Date

PLEASE TAKE NOTICE that as this Order constitutes a denial of full and unconditional licensure, you may have a right to a hearing, if you file a request for hearing in accordance with the provisions of Ch. RL 1 of the Wisconsin Administrative Code. You may request a hearing within 45 calendar days after the mailing of this notice of denial. Your request must be submitted in writing to the Board of Nursing at: Department of Regulation and Licensing, 1400 East Washington Avenue, P.O. Box 8935, Madison, WI 53708-8935.

The request must contain your name and address, the type of credential for which you have applied, a specific description of the mistake in fact or law that you assert was made in the denial of your credential, and a concise statement of the essential facts which you intend to prove at the hearing. You will be notified in writing of the Board of Nursing's decision. Under s. RL 1.08 of the Wisconsin Administrative Code, a request for a hearing is denied if a response to a request for a hearing is not issued within 45 days of its receipt by the Board. Time periods for a petition for review begin to run 45 days after the Board has received a request for a hearing and has not responded.