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STATE OF WISCONSIN
BEFORE THE SOCIAL WORKER SECTION
MARRIAGE AND FAMILY THERAPY, PROFESSIONAL COUNSELING,
AND SOCIAL WORK EXAMINING BOARD

IN THE MATTER OF THE DISCIPLINARY	:	
PROCEEDINGS AGAINST	:	
	:	LS0502024SOC
MARGARET A. POFAHL, L.C.S.W.,	:	
RESPONDENT.	:	

FINAL DECISION AND ORDER

The parties to this action for the purposes of Wis. Stat. § 227.53 are:

Margaret A. Pofahl, L.C.S.W.
6162 1st Street
Hartford, WI 53027

Social Worker Section
Wisconsin Marriage and Family Therapy,
Professional Counseling, and Social Work Examining Board
P.O. Box 8935
Madison, WI 53708-8935

Department of Regulation and Licensing
Division of Enforcement
P.O. Box 8935
Madison, WI 53708-8935

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final decision in this matter, subject to the approval of the Social Worker Section. The Section has reviewed this Stipulation and considers it acceptable.

Accordingly, the Section in this matter adopts the attached Stipulation and makes the following:

FINDINGS OF FACT

1. Margaret A. Pofahl, L.C.S.W., Respondent, date of birth October 7, 1948, is licensed by the Social Worker Section as a clinical social worker in the state of Wisconsin pursuant to license number 203, which was first granted August 3, 1993. (Prior to a statutory change effective 11/01/02, Respondent's credential was a certificate as an independent clinical social worker.)
2. Respondent received a master's degree in social work from the University of Wisconsin-Milwaukee on August 21, 1984.
3. Respondent was granted certification pursuant to the grand-parenting provisions of 1991 Act 160, § 21(2)(d), based upon her having a masters degree in social work. For this reason, Respondent did not take the examination otherwise required for certification.
4. Respondent's last address reported to the Department of Regulation and Licensing is 6162 1st Street, Hartford, WI 53027.
5. Respondent provided psychotherapy to Ms. A from December 1995 until January 2000:

a. Ms. A had a history of physical and sexual abuse by an ex husband, low self esteem, depression, a history of anorexia and relationship issues with family members. A treatment plan was developed which included individual and group sessions, with short term and long term objectives.

b. Respondent initially diagnosed Ms. A with depression (not otherwise specified), battered woman syndrome and anorexia nervosa, in remission. She later changed the diagnosis to major depressive disorder and post traumatic stress disorder (PTSD). Respondent considered a diagnosis of borderline personality disorder, but felt Ms. A's symptoms, which included flashbacks, warranted the PTSD diagnosis.

c. Individual sessions took place one to three times a month as needed. Ms. A also attended group sessions conducted by Respondent or other staff at the clinic. There were periods of time during the therapeutic relationship that Ms. A elected not to receive therapy for months at a time.

d. Ms. A had serious problems with trust, but eventually came to trust Respondent and rely upon her for support.

6. In the fall of 1998, Ms. A began taking classes and participating in group sessions at the Center for Creative Learning, which provided personal and professional development programs. Among other things, Ms. A attended a weekend workshop for sexual abuse survivors, which Respondent facilitated. During this time, Ms. A revealed suicidal thoughts to Respondent. She brought a gun to a session, which she turned over to Respondent.

7. On October 8, 1999, Ms. A took excessive quantities of her prescribed psychotropic medications and was taken by friends to a hospital emergency room, where she was treated overnight and released. Ms. A denied that she was attempting to harm herself.

8. Following October 8, 1999, Respondent was certain that Ms. A required continued psychotherapy. However, Respondent also realized that an intractable mother-daughter transference/counter-transference had developed. Respondent believed Ms. A could benefit from the development of a surrogate mother-daughter relationship with a person who was not her psychotherapist. Respondent discussed this with Ms. A and they agreed the best course of action was to refer Ms. A to another psychotherapist for treatment and Respondent would then have a personal supportive relationship with Ms. A.

a. Respondent consulted with the psychologist who was providing her with clinical supervision. Based on Respondent's explanation that an intractable mother-daughter transference/counter-transference had developed with Ms. A and that Ms. A agreed to transfer to another therapist, the psychologist supported Respondent's plan to terminate her treatment of Ms. A and transfer Ms. A's care to another therapist.

b. The psychologist also expressed concern over Respondent's plan to enter into a personal relationship with Ms. A after the therapy relationship ended. She told Respondent that the code of conduct for psychologists warned against dual relationships with clients even, in some cases, after termination of therapy. She suggested Respondent review her own code of ethics and obtain additional guidance from the clinic director.

c. Respondent did speak with the clinic director, who was a certified independent clinical social worker but was not her clinical supervisor. Respondent sought the clinic director's collegial advice on the best way to help Ms. A and told the clinic director:

i. Ms. A had needs which exceeded what could be obtained through therapy alone.

ii. Ms. A had come to rely heavily upon her and had clearly begun to care for her in a more personal manner.

iii. Ms. A desperately wanted a mother figure in her life.

iv. Respondent believed Ms. A needed such a figure in order to become a wholly well person.

v. That she had sought the advice of her clinical supervisor and the certified independent clinical social worker who had agreed to provide Ms. A's therapy.

d. The clinic director supported Respondent's decision to transfer Ms. A's care to a therapist in another clinic.

9. During an individual session on December 14, 1999, Respondent noted Ms. A had increased anxiety as she considered therapist transfer. On December 16, Ms. A and Respondent had a session with the new therapist to facilitate the transfer of care.

10. Ms. A then saw Respondent for individual sessions on December 21 and January 4 before transferring permanently to the new therapist. Approximately a month later, they established a surrogate mother/daughter relationship.

11. Ms. A was hospitalized at Milwaukee Psychiatric Hospital from January 9 through February 7, 2000 following her having taken an excess quantity of prescription medications. The new therapist diagnosed Ms. A with borderline personality disorder. Ms. A transferred to yet another therapist in April 2000 when she became upset with the therapist for canceling an appointment due to a family illness.

12. In 2001, Ms. A began engaging in destructive behavior and Respondent felt that Ms. A was manipulating her. Respondent again sought advice from the clinic director. The clinic director concluded that Respondent had been manipulated by Ms. A and advised her to terminate her relationship. Respondent called Ms. A and told her that she could no longer have any relationship with her because of ethics and boundaries. Following the exchange of a few e-mails, Respondent ended the relationship. Ms. A asserts that this caused her grief and pain which she attempted to alleviate by taking an excessive quantity of her prescription medications.

13. Subsequent to these events, Respondent has completed the following related continuing education:

a. *Social Work Ethics and Professional Boundaries*, on April 11, 2001, sponsored by the University of Wisconsin-Milwaukee School of Social Welfare and University Outreach (4 hours of continuing education).

b. *Ethical Decisions*, on March 6, 2003 in Milwaukee, Wisconsin, sponsored by Leadership Seminars (approved for 4 hours of ethics and 2 hours of boundary issues continuing education).

14. Respondent has been employed in a different clinic since September 2002. According to the supervising psychologist at that clinic, in order to assure compliance with the standard of practice regarding therapist-client boundaries:

a. Respondent and the supervising psychologist have discussed the boundary issues in the Ms. A situation.

b. Respondent and the supervising psychologist had a series of meetings discussing professional issues, including boundaries.

c. During weekly staffings/case conferences, on numerous occasions, Respondent has discussed professional issues, including boundaries.

15. At the time it occurred, Respondent felt it was in Ms. A's best interests for Respondent to have a personal supportive relationship with Ms. A following the termination of the professional relationship. In retrospect, Respondent recognizes that it was inappropriate for her to have done so.

16. Neither the Section nor the Department has received any other complaints regarding Respondent's practice during the 11 years she has been credentialed by the Section.

CONCLUSIONS OF LAW

1. The Social Worker Section of the Wisconsin Marriage and Family Therapy, Professional Counseling and Social Work Examining Board has jurisdiction over this matter pursuant to Wis. Stat. § 457.26(2) and has authority to enter into this stipulated resolution pursuant to Wis. Stat. § 227.44(5).

2. Respondent's conduct, as set out above, constitutes the failure to avoid dual relationships, which is unprofessional conduct as defined by Wis. Admin. Code § MPSW 20.02 (13) and subjects Respondent to discipline pursuant to Wis. Stat. § 457.26(2)(f).

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED:

1. Within 120 days of the date of this Order, Respondent shall take and complete 6 hours of continuing education on the subject of diagnosis and treatment of personality disorders, which course or courses shall first be approved by the Section or its designee as being acceptable for meeting the requirements of this Order.

2. Respondent shall provide the Section with proof of satisfactory completion of the continuing education within 30 days of completion. Respondent is prohibited from applying these credits toward satisfaction of the continuing education required during the July 1, 2003 through June 30, 2005 registration biennium.

3. Respondent shall, within 120 days of the date of this Order, pay to the Department of Regulation and Licensing the costs of this proceeding in the amount of \$300.00 pursuant to Wis. Stat. § 440.22(2).

4. All requests, notifications and payment shall be mailed, faxed or delivered to:

Department Monitor
Department of Regulation and Licensing
Division of Enforcement
1400 East Washington Ave.
P.O. Box 8935
Madison, WI 53708-8935
Fax (608) 266-2264
Telephone (608) 267-3817

Dated at Madison, Wisconsin this 2nd day of February, 2005.

George Kamps
Chairperson
Social Worker Section