WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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STATE OF WISCONSIN BEFORE THE DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES

IN THE MATTER OF APPLICATION FOR SUBSTANCE ABUSE COUNSELOR-IN-TRAINING FOR

ORDER GRANTING LIMITED CREDENTIAL

STEVEN HAHN, APPLICANT.

0003631

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

STEVEN HAHN 214 1/2 W PACIFIC ST APT 2 APPLETON WI 54911

DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES 1400 E. WASHINGTON AVENUE P.O. BOX 8935 MADISON, WI 53708-8935

FINDINGS OF FACT

- 1. STEVEN HAHN (Applicant) has filed an application for a credential to practice as a substance abuse counselor-in-training in Wisconsin.
- 2. Information received in the application process reflects the following convictions:
- 1976 Reckless Driving
- 1977 Contribute Delinquency
- 1982 Operating While Intoxicated
- 1998 Operating While Intoxicated
- 1991- Public Intoxication
- 1991- Public Intoxication
- 1991- Public Intoxication
- 1992- Public Intoxication
- 1992- Public Intoxication
- 2001 Failure to Appear
- 2006 Distribution of THC to minors
- 2006 Possession of THC
- 2006 Resisting or Obstructing an Officer
- 2006 Neglecting a Child

CONCLUSIONS OF LAW

- 1. The Wisconsin Department of Safety and Professional Services has jurisdiction over this matter pursuant to Wis. Stat. §440.88.
- 2. The facts and circumstances of the past convictions are substantially related to your request for certification as a substance abuse counselor-in-training.

ORDER

NOW, THEREFORE, IT IS ORDERED that STEVEN HAHN is GRANTED A SUBSTANCE ABUSE COUNSELOR-IN-TRAINING CREDENTIAL subject to the following LIMITATIONS, TERMS AND CONDITIONS:

Practice Limitations

- 1. Applicant shall provide a copy of this Order to all prospective employers.
- 2. Applicant shall commit no new violations of law, and shall report all law enforcement contacts leading to arrest, charge or conviction to the Department Monitor within 48 hours of any such event.

Reporting Requirements

- 3. It is Applicant's responsibility to arrange for his supervisor(s) to provide work reports to the Department Monitor on a quarterly basis, as directed by Department Monitor. These reports shall describe the Applicant's activities and verify that he is in compliance with the laws governing the practice of a substance abuse counselor-in-training and the terms of this Order.
- 4. Applicant shall file with the Department quarterly reports at the direction of the Department Monitor commencing ninety (90) days after Applicant commences employment. Each report shall include the following:
 - a. The name, address and telephone number of Applicant, and name, address and telephone number of Applicant's employer;

- b. A statement from the Applicant as to whether he has had any law enforcement contacts leading to arrest, charge or conviction (including DWI/OWI) during the term of the Order;
- c. Applicant shall report to the Department Monitor any change of employment status, residence, address or telephone number within five (5) days of the date of a change.
- 5. Applicant is responsible for compliance with all of the terms and conditions of this Order, including the timely submission of reports by others. Applicant shall promptly notify Department Monitor of any suspected violations of any of the terms and conditions of this Order by Applicant.

DEPARTMENT MONITOR

6. The Department Monitor is the individual designated by the department as its agent to coordinate compliance with the terms of this Order. Any requests, petitions, reports or other information required by this Order shall be mailed, faxed or delivered to:

DEPARTMENT MONITOR

Department of Safety and Professional Services
Division of Legal Services & Compliance
1400 East Washington Ave., P.O. Box 8935
Madison, WI 53708-8935
Fax: (608) 266-2264

Telephone: (608) 267-3817

Petitions for Modification

7. Applicant may petition the Department Monitor for modification of the terms of this Order after completion of two years of practice in compliance with all terms and conditions of this Order. Applicant's petition must include Applicant's history of employment from the effective date of this Order that states the dates and names of any employer, such employment in total equaling one year of practice. Any such petition shall be accompanied by a written recommendation from Applicant's current employer that includes, among other things, the dates of employment and scope of responsibility during such employment. A denial of such a petition for modification shall not be deemed a denial of credential under Wis. Stats. § 227.01(3), Wis. Admin. Code ch. SPS 1, and shall not be subject to any right to further hearing or appeal.

Costs

8. Applicant shall be responsible for all costs and expenses associated with compliance with the terms of this Order.

Summary Suspension/Additional Discipline

9. Violation of any of the terms of this Order may be construed as conduct imperiling public health, safety and welfare and may result in a summary suspension of Applicant's credential. The Department, 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. In the event that Applicant fails to submit quarterly reports as ordered, Applicant's credential may, in the discretion of the Department or its designee, be SUSPENDED, without further notice or hearing, until Applicant has complied with the terms of this Order.

Dated at Madison, Wisconsin this 1 th day of December, 2014

Michael J. Berndt, Chief Legal Counsel

On behalf of the Department of Safety and Professional Services

STATE OF WISCONSIN BEFORE THE DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES

IN THE MATTER OF APPLICATION FOR SUBSTANCE ABUSE COUNSELOR-IN-TRAINING FOR

STIPULATION

0003631

STEVEN HAHN, APPLICANT.

It is hereby stipulated between the above-referenced Applicant and the State of Wisconsin Department of Safety and Professional Services as follows:

The Applicant has filed an application for a substance abuse counselor-in-training credential. Information received by the Department reflects a basis for denial of the application for a credential. Based upon the information of record herein, the Department agrees to issue and the Applicant agrees to accept an Order Granting a Limited Credential as a substance abuse counselor-in-training subject to the terms and conditions set forth in the attached Order Adopting Stipulation.

Dated this ____ day of <u>December</u>, 2014

Steven Hahn, Applicant

STATE OF WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES

Dated this 11th day of Decuhu, 2014

By:

Michael J Berndt, Chief Legal Counsel

On behalf of the Department of Safety and Professional Services

Wisconsin Department of Safety and Professional Services Division of Professional Credential Processing 1400 E. Washington Ave PO Box 8935 Madison WI 53708-8366



Phone: 608-266-2112 Web: http://dsps.wi.gov Email: dsps@wisconsin.gov

Scott Walker, Governor Dave Ross, Secretary

November 26, 2014

STEVEN HAHN 214 1/2 W PACIFIC ST APT 2 APPLETON WI 54911

RE: Application # 514868 for Substance Abuse Counselor-in-Training

Dear Mr. Hahn:

The Department of Safety and Professional Services (Department) has reviewed your application file and has concluded that your past convictions substantially relate to your request for certification as a substance abuse counselor-in-training. The Department therefore offers you the enclosed Stipulation and Order, which would grant you a limited credential as a substance abuse counselor-in-training, subject to specified terms and conditions. A Stipulation is an agreement between the Department and yourself to recommend a resolution of this matter.



Please review the enclosed Stipulation and Order carefully. If the Stipulation and Order are acceptable to you, return the signed Stipulation to the Department by 1/10/15. The Department will then issue your credential, conditioned upon the terms set forth in the Order.

If you do not accept the Stipulation and Order, this letter constitutes a Notice of Denial of your application for full and unconditional certification. PLEASE NOTE that you have a right to a hearing on the denial of your application if you file a request for hearing in accordance with the provisions of Wis. Admin. Code Chapter SPS 1. 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:

Department of Safety and Professional Services Division of Professional Credential Processing 1400 E. 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 Department's decision. Under Wis. Admin. Code § SPS 1.08, a request for a hearing is denied if a response to a request for hearing is not issued within 45 days of its receipt by the Department. Time periods for a petition for review begin to run 45 days after the Department has received a request for a hearing and has not responded.

Thank you for your cooperation.

Sincerely,

Michael J. Bernott, Chief Legal Counsel

On behalf of the Department of Safety and Professional Services

Wisconsin Department of Safety and Professional Services Division of Professional Credential Processing 1400 E. Washington Ave PO Box 8935 Madison WI 53708-8366



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Thank you for your cooperation.

Sincerely,

Michael J. Berndt, Chief Legal Counsel

On behalf of the Department of Safety and Professional Services

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