

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF APPLICATION FOR
A REGISTERED NURSE LICENSE

TAYLOR CROWNOVER,
APPLICANT.

:
:
: ORDER GRANTING
LIMITED LICENSE

:
:
: **0005616**

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

Taylor Crownover
1302 Sunnyridge Road
Unit #1
Pewaukee, WI 53072

Wisconsin Board of Nursing
1400 East Washington Avenue
P.O. Box 8935
Madison, WI 53708-8935

FINDINGS OF FACT

- I. Taylor Crownover (Applicant) has filed an application (# 621719) for a credential to practice as a Registered Nurse (RN) in Wisconsin via Endorsement.
- II. Information received in the application process reflects that the Applicant was granted a license as an RN in Arkansas on May 2, 2012.
 - A. On or about July 1, 2013, Applicant voluntarily surrendered her Arkansas RN license.
 - i. Applicant explained that she surrendered her license due to an arrest that occurred on June 8, 2012, for possession of drugs, possession of drug paraphernalia, maintaining a drug premises, and endangering the welfare of a minor. The Applicant states that she and her daughter's father used drugs off and on together and it continued to spiral out of control. The police report states that Applicant was identified using illegal narcotics and had a six-year-old child in the house. Police search found approximately 100 used syringes, 20 bent spoons with burnt residue, oxymorphone pills, and a set of measuring scales.
 - ii. Applicant was convicted of three felony drug offenses on or about May 20, 2013, and was put on probation for 72 months. Applicant successfully completed the terms of her probation and was granted her petition to dismiss and seal the convictions.

B. On or about August 17, 2017, Applicant signed a consent order and was granted reinstatement of her Arkansas RN license.

- i. Arkansas found that at the time of her voluntary surrender, Applicant admitted a history of substance use disorder. Applicant reports her sobriety date is December 31, 2015.
- ii. Arkansas required Applicant complete reinstatement requirements which included drug screening. Arkansas relied upon the July 15, 2017, letter from Dr. Makhija.
 1. The letter states that Applicant has been diagnosed with generalized anxiety disorder, panic disorder without agoraphobia, PTSD, ADHD, combined presentation, and opiate use disorder, severe in sustained remission. Dr. Makhija opined that she considered Applicant safe to practice.
- iii. Arkansas put Applicant's license on probation for a period of two (2) years, subject to numerous terms and conditions including enrollment in an approved treatment program, random drug screens, direct supervision, and complete sobriety. A copy of the Arkansas Consent Order is attached and incorporated by reference.

CONCLUSIONS OF LAW

- I. The Board has jurisdiction over this matter pursuant to Wis. Stat. § 441.06, and is authorized to enter into the attached Stipulation pursuant to Wis. Stat. §§ 15.08(5)(c) and 227.44(5).
- II. Applicant has engaged in unprofessional conduct by having a license to practice nursing limited. Wis. Stat. §§ 440.07(1g)(b) and (d); and Wis. Admin. Code § N 7.01(b).
- III. Applicant's diagnoses of anxiety disorder, panic disorder without agoraphobia, PTSD, ADHD, combined presentation, and opiate use disorder, severe in sustained remission demonstrate Applicant is unfit or incompetent to practice by reason of negligence, abuse of alcohol or other drugs, or mental incompetency. Wis. Stat. §§ 441.07(1g)(b), (c), and (d); and Wis. Admin. Code §§ N 7.03(6)(f) and 7.03(6)(g).
- IV. Applicant by her conduct is subject to action against her license pursuant to Wis. Stat. §§ 441.07(1g)(b), (c), and (d); and Wis. Admin. Code §§ N 7.01(b), 7.03(6)(f), and 7.03(6)(g).

ORDER

NOW, THEREFORE, IT IS ORDERED that Taylor Crownover is GRANTED A REGISTERED NURSE LICENSE subject to the following LIMITATIONS, TERMS AND CONDITIONS:

CONDITIONS AND LIMITATIONS

Practice Limitations

- A.1. Applicant shall provide a copy of this Order, all previous Orders and any future Order to her employer's human resources department and direct supervisor at all settings where Applicant works as a Registered Nurse or care giver or provides health care, currently or in the future, during the duration of the limited license. Applicant shall provide the Department of Safety and Professional Services Monitor (Department Monitor) with written acknowledgement from each employer that a copy of this Order has been received. Such acknowledgement shall be provided to the Department Monitor within fourteen (14) days of beginning new employment and/or within fourteen (14) days of the date of this Order for employment current as of the date of this Order.
- A.2. It is Applicant's responsibility to arrange for written reports from her direct supervisor to be provided to the Department Monitor on a quarterly basis. These reports shall assess Applicant's work performance, attendance and include the number of hours of active nursing practice worked during that quarter.
- A.3. Applicant shall not work in a home health, group homes, hospice, assisted living facilities, pool nursing, correctional facility, through temporary placement agencies or agency setting.
- A.4. Applicant shall practice only in a work setting pre-approved by the Board or its designee, and only under the direct supervision of a licensed registered nurse or other licensed health care professional approved by the Board or its designee.
- A.5. Applicant may not work as a provider in a setting in which Applicant has access to controlled substances.
- A.6. Pursuant to the Nurse Licensure Compact and the Enhanced Nurse Licensure Compact regulations, Applicant's nursing practice is limited to Wisconsin during the pendency of this limitation. This requirement may be waived only upon the prior written authorization of both the Board and the regulatory board in the state in which Applicant proposes to practice.
- A.7. 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.

Treatment Required

- A.8. Applicant shall enter into and continue, in an alcohol/drug addiction program with a Treater acceptable to the Board or its designee. Participation shall begin within 30 days of the date of this Order. Applicant shall participate in, cooperate with, and follow all treatment recommended by Treater.
- A.9. Applicant shall immediately provide Treater with a copy of this Order and all other subsequent orders.
- A.10. Treater shall be responsible for coordinating Applicant's rehabilitation, alcohol/drug monitoring and treatment program as required under the terms of this Order, and shall immediately report any relapse, violation of any of the terms and conditions of this Order, and any suspected unprofessional conduct, to the Department Monitor. If Treater is

unable or unwilling to serve as Treater, Applicant shall immediately seek approval of a successor Treater by the Board or its designee.

- A.11. The rehabilitation program shall include individual and/or group therapy sessions at a frequency to be determined by Treater. Therapy may end only upon a determination by the Board or its designee after receiving a petition for modification as required by B.5., below.
- A.12. Treater shall submit formal written reports to the Department Monitor on a quarterly basis, as directed by the Department Monitor. These reports shall assess Applicant's progress in the drug and alcohol treatment program. Treater shall report immediately to the Department Monitor any violation or suspected violation of this Order.

Releases

- A.13. Applicant shall provide and keep on file with Treater, all treatment facilities and personnel, laboratories and collections sites current releases complying with state and federal laws. The releases shall allow the Board, its designee, and any employee of the Division to: (a) obtain all urine, blood and hair specimen screen results and patient health care and treatment records and reports, and (b) discuss the progress of Applicant's treatment and rehabilitation. Copies of these releases shall immediately be filed with the Department Monitor.

AA/NA Meetings

- A.14. Applicant shall attend Narcotics Anonymous and/or Alcoholics Anonymous meetings or an equivalent program for recovering professional, at the frequency recommended by Treater, but no less than twice per week. Attendance of Applicant at such meetings shall be verified and reported quarterly to Treater and the Department Monitor.

Sobriety

- A.15. Applicant shall abstain from all personal use of alcohol.
- A.16. Applicant shall abstain from all personal use of controlled substances as defined in Wis. Stat. § 961.01(4), except when prescribed, dispensed or administered by a practitioner for a legitimate medical condition.
- A.17. Applicant shall abstain from all use of over-the-counter medications or other substances (including but not limited to natural substances such as poppy seeds) which may mask consumption of controlled substances or of alcohol, create false positive screening results, or interfere with Applicant's rehabilitation. It is Applicant's responsibility to educate herself about the medications and substances which may violate this paragraph, and to avoid those medications and substances.
- A.18. Applicant shall report to the Department Monitor all prescription medications and drugs taken by Applicant. Reports must be received within 24 hours of ingestion or administration of the medication or drug, and shall identify the person or persons who prescribed, dispensed, administered or ordered said medications or drugs. Each time the

prescription is filled or refilled, Applicant shall immediately arrange for the prescriber or pharmacy to fax and mail copies of all prescriptions to the Department Monitor.

Drug and Alcohol Screens

- A.19. Applicant shall participate in a drug and alcohol monitoring program which is approved by the Department Monitor (Approved Program). Participation shall begin within 30 days of the date of this Order.
- A.20. Applicant shall review all of the rules and procedures made available by the Approved Program. Failure to comply with all requirements for participation in drug and alcohol monitoring established by the Approved Program is a substantial violation of this Order. The requirements shall include:
- (a) Contact with the Approved Program as directed on a daily basis, including vacations, weekends and holidays.
 - (b) Production of a urine, blood, sweat, fingernail, hair, saliva or other specimen at a collection site designated by the Approved Program within five (5) hours of notification of a test.
- A.21. The Approved Program shall require the testing of specimens at a frequency of not less than 28 urine screens and one hair test per year. Applicant may petition the Board on an annual basis for a modification of the frequency of tests pursuant to provision B.5. below. The board may adjust the frequency of testing on its own initiative at any time.
- A.22. If any urine, blood, sweat, fingernail, hair, saliva or other specimen is positive or suspected positive for any controlled substances or alcohol, Applicant shall promptly submit to additional tests or examinations as the Board or its designee shall determine to be appropriate to clarify or confirm the positive or suspected positive test results.
- A.23. In addition to any requirement of the Approved Program, the Board or its designee may require Applicant to do any or all of the following: (a) submit additional urine specimens; (b) submit blood, hair or breath specimens (c) furnish any specimen in a directly witnessed manner.
- A.24. All confirmed positive test results shall be presumed to be valid. Applicant must prove by a preponderance of the evidence an error in collection, testing, fault in the chain of custody or other valid defense.

MISCELLANEOUS

Department Monitor

- B.1. Any requests, petitions, reports and other information required by this Order shall be mailed, e-mailed, faxed or delivered to:

Department Monitor
Department of Safety and Professional Services
1400 E. Washington Ave.
P.O. Box 7190, Madison, WI 53707-7190
Telephone (608) 267-3817; Fax (608) 266-2264
DSPSMonitoring@wisconsin.gov

Required Reporting by Applicant

- B.2. 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 the Department Monitor of any failures of the Treater, treatment facility, Approved Program or collection sites to conform to the terms and conditions of this Order. Applicant shall promptly notify the Department Monitor of any violations of any of the terms and conditions of this Order by Applicant.
- B.3. Applicant shall report to the Board any change of employment status, residence, address or telephone number within five (5) days of the date of the change. Additionally, Applicant shall report any convictions or disciplinary action taken against any license within 48 hours of receipt of the judgment of conviction or final order. Every three (3) months, Applicant shall notify the Department Monitor of Applicant's compliance with the terms and conditions of the Order, and shall provide the Department Monitor with a current address and home telephone number.

Change of Treater or Approved Program by Board

- B.4. If the Board or its designee determines the Treater or Approved Program has performed inadequately or has failed to satisfy the terms and conditions of this Order, the Board or its designee may direct that Applicant continue treatment and rehabilitation under the direction of another Treater or Approved Program

Petitions for Modification of Limitations or Termination of Order

- B.5. Applicant may petition the Board on an annual basis for modification of the terms of this Order, but no petition for modification shall be considered sooner than one (1) year from the date of this Order. Denial of a petition in whole or in part shall not be considered a denial of a license within the meaning of Wis. Stat. § 227.01(3)(a), and Applicant shall not have a right to any further hearings or proceedings on the denial.
- B.6. Applicant may petition the Board for full, unrestricted licensure upon demonstration of continuous, successful compliance with the terms of the Order for at least two (2) years, including at least 600 hours of active nursing practice each year. "Practice in compliance" includes the submission of work reports and treater reports, the content of which are satisfactory to the Board.

Costs of Compliance

- B.7. Applicant shall be responsible for all costs and expenses incurred in conjunction with the monitoring, screening, supervision and any other expenses associated with compliance with the terms of this Order. Being dropped from a program for non-payment is a violation of this Order.

Suspension/Additional Discipline

- B.8. In the event that Applicant violates any term of this Order, Applicant's license may, in the discretion of the Board or its designee, be SUSPENDED, without further notice or hearing, until Applicant has provided proof, which is determined by the Board or its designee to be sufficient, that Applicant is in compliance with the terms of the Order. The Board may, in addition and/or in the alternative, refer any violation of this Order to the Division of Legal Services and Compliance for further investigation and action.

Dated at Madison, Wisconsin this 2 day of Feb, 2018.

WISCONSIN BOARD OF NURSING

By:


A Member of the Board

STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF APPLICATION FOR
A REGISTERED NURSE LICENSE

TAYLOR CROWNOVER,
APPLICANT.

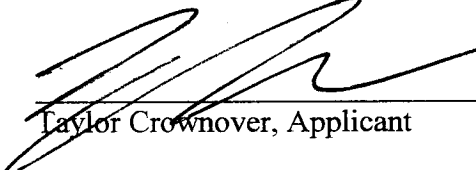
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STIPULATION

0005616

It is hereby stipulated between the above-referenced Applicant and the State of Wisconsin Board of Nursing (Board) as follows:

The Applicant has filed an application for a Registered Nurse license. Information received by the Board reflects a basis for denial of the application for a credential. Based upon the information of record, the Board agrees to issue, and the Applicant agrees to accept a Limited License as a Registered Nurse subject to the terms and conditions set forth in the attached Order.

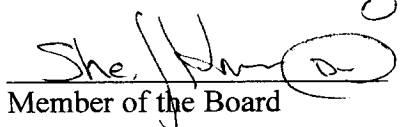
Dated this 29th day of January, 2018


Taylor Crownover, Applicant

STATE OF WISCONSIN
BOARD OF NURSING

Dated this 2 day of February, 2018

By:


Member of the Board

BEFORE THE ARKANSAS STATE BOARD OF NURSING

IN THE MATTER OF:

TAYLOR MARIE CARAVELLA CROWNOVER

RN LICENSE NO. R088860 (EXPIRED)

CONSENT AGREEMENT

REINSTATEMENT

26 Taylor Marie Caravella Crowover (hereinafter referred to as "Respondent") had voluntarily surrendered the privilege to practice and licensure to the Arkansas State Board of Nursing (hereinafter referred to as "the Board") and now requests reinstatement of licensure. In the interest of a prompt and speedy settlement of the above-captioned matter consistent with public interest, statutory requirements, and the responsibilities of the Board, the undersigned parties enter into this Reinstatement Consent Agreement as a final disposition of this matter.

Based on the evidence before it, the Board makes the following Findings of Fact, Conclusions of Law and Order:

I. Findings of Fact

- 26 1. Respondent is the holder of Arkansas RN License No. R088860 (expired).
- 26 2. Respondent voluntarily surrendered the privilege to practice and licensure on July 3, 2013, in lieu of a hearing and now requests reinstatement of licensure through this agreement.
- 26 3. At time of her voluntary surrender, Respondent admitted to a history of substance use disorder. Respondent states she has been clean and sober since December 31, 2015.
- 26 4. Respondent has completed reinstatement requirements including drug screening.
- 26 5. Respondent is seen by Veronica Makhija, M.D., and she considers Respondent safe to practice.

IN THE MATTER OF:

TAYLOR MARIE CARAVELLA CROWNOVER

RN LICENSE NO. R088860 (EXPIRED)

II. Conclusions of Law

26 1. Pursuant to Ark. Code Ann. §17-87-203 and §17-87-309, the Board has subject matter and personal jurisdiction in this matter.

26 2. The conduct described in the Findings of Fact constitutes a violation of Ark. Code Ann. §17-87-309(a)(4) and (a)(6).

26 3. The conduct described in the Findings of Fact constitutes sufficient cause pursuant to Ark. Code Ann. §17-87-309 to suspend, revoke or otherwise discipline a licensee who possesses a nursing license or the privilege to practice nursing in the State of Arkansas.

III. Order

26 1. Respondent admits the Board's Findings of Fact and Conclusions of Law.

26 2. In lieu of a formal hearing on these issues, Respondent agrees to the issuance of the attached Order and waives all rights to a hearing, appeal, or judicial review relating to the Order.

26 3. Respondent understands that all investigative materials prepared or received by the Board concerning these violations and all notices and pleadings relating thereto may be retained in the Board's file concerning this matter.

26 4. Respondent understands that those admissions are conclusive evidence of a prior violation of the Arkansas Nurse Practice Act and may be used for the purposes of determining sanctions in any future disciplinary matter.

26 5. Respondent understands the right to consult legal counsel prior to entering into this Consent Agreement and such consultation is waived.

IN THE MATTER OF:

TAYLOR MARIE CARAVELLA CROWNOVER

RN LICENSE NO. R088860 (EXPIRED)

6. Respondent understands as a result of entering into this Consent Agreement that the terms of this agreement become public record and shall be reported to the National Council of State Boards of Nursing Disciplinary Data Bank and the National Practitioner Data Bank.

7. Respondent understands that this Consent Agreement is effective upon its acceptance by the Board.

IN THE MATTER OF:

TAYLOR MARIE CARAVELLA CROWNOVER

RN LICENSE NO. R088860 (EXPIRED)

ORDER

In view of the above Findings of Fact, Conclusions of Law, and the consent of Respondent, the Board hereby issues the following Order:

26 1. Respondent consents to the terms and conditions of the Order and waiver of a public hearing is accepted.

26 2. Respondent's licensure is placed on probation for two (2) years. Probation is to commence on the effective date of this Order and is subject to the following conditions:

26 a. Once applicable fees and continuing education requirements have been received and processed, Respondent's license will be reinstated to probation.

26 b. Respondent's responsibility is to ensure that all reports are submitted to the Board on a quarterly basis.

26 c. Respondent must immediately notify the Board in writing of any change, even a temporary one, in name, address, or employer.

26 d. Respondent shall execute any release necessary to give the Board of Nursing access to records, including but not limited to medical, employment and criminal records. Failure to execute a release shall be grounds for disciplinary action against Respondent's nursing license/privilege.

26 e. Respondent shall obey all federal, state, and local laws, and all rules governing the practice of nursing in this state.

26 f. All costs involved in complying with this Order shall be borne by the

IN THE MATTER OF:

TAYLOR MARIE CARAVELLA CROWNOVER

RN LICENSE NO. R088860 (EXPIRED)

Respondent.

26 g. Respondent shall attend AA/NA, or other Board approved treatment program and must submit quarterly reports to the Board. Respondent shall provide acceptable evidence of attendance. Acceptable evidence shall consist of completion of the disciplinary form: Aftercare Meetings Report. It is ordered that Respondent shall attend at least one (1) AA/NA or other Board approved support group meetings a week during the period of supervision.

26 h. Respondent must submit to observed random drug screens. Drug screens include, but are not limited to urine, hair, and blood. The observed drug screens must meet the criteria established by the Board and be conducted through a Board-approved drug screen monitoring program, laboratory, and collection site. Contact must be made with a Board-approved drug screen-monitoring program within five (5) business days of receipt of this Order. Respondent cannot submit specimens at Respondent's place of employment or practice site. Respondent cannot collect any drug screen ordered by the Board of Nursing. Respondent must contact the drug screening company **daily**. If selected for testing, Respondent shall present for a drug screen **the same day** of the notification and shall have **two (2) hours** to have the specimen collected.

26 i. Respondent shall abstain at all times from the use of controlled or abuse potential substances, including alcohol and products that contain alcohol. Respondent shall not consume hemp, poppy seeds, or any product or by-product containing the same. Short-

IN THE MATTER OF:

TAYLOR MARIE CARAVELLA CROWNOVER

RN LICENSE NO. R088860 (EXPIRED)

term treatment may be allowed for an acute illness or acute condition. Short-term treatment is considered a course of treatment that is limited in duration. The Respondent shall notify board staff in writing immediately of any acute illness or acute condition that is diagnosed and treated. Respondent shall ensure that the prescribing practitioner submits a written report to board staff within ten (10) days of prescribing a controlled or abuse potential substance.

26 j. Respondent is responsible for submitting a personal report to accompany required data to the Board on a quarterly basis.

26 k. Respondent must notify each present and future employer in professional nursing of this Order of the Board and the probation conditions on Respondent's license and present to every employer in professional nursing a copy of this Consent Agreement and Order.

26 l. Respondent, if employed as a nurse, must practice under an employer-monitored nurse contract. A copy of the employer-monitored nurse contract and a quarterly Performance Evaluation Report must be submitted by the employer to the Board. It is the responsibility and duty of Respondent to insure that the employer submits these documents in a timely fashion.

26 m. Respondent shall not practice outside the State of Arkansas in another Enhanced Nurse Licensure Compact state.

26 n. Respondent must work under supervision in any setting. Supervision requires another nurse to be working in the same setting as Respondent and readily available to

IN THE MATTER OF:

TAYLOR MARIE CARAVELLA CROWNOVER

RN LICENSE NO. R088860 (EXPIRED)

provide assistance and intervention.

P o. Respondent shall execute any release necessary to give the Board of Nursing access to records, including but not limited to medical, employment and criminal records. Failure to execute a release shall be grounds for disciplinary action against Respondent's nursing license/privilege.

B p. Verification of termination of the probationary period shall be requested in a letter to the Board.

I HAVE INITIALED EACH NUMBERED OR LETTERED PARAGRAPH OF THE PROPOSED CONSENT AGREEMENT AND ORDER AS PROOF THAT I HAVE READ IT, UNDERSTAND IT, AND DO NOT WISH TO CONTACT THE ARKANSAS STATE BOARD OFFICE FOR FURTHER EXPLANATION. I ACCEPT THE PROPOSED CONSENT AGREEMENT AND ORDER AS STATED.

State of Wisconsin
Arkansas
County of Harrison

RESPONDENT'S SIGNATURE

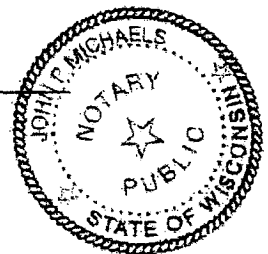
8-17-17
DATE

Subscribed and Sworn to before me, a Notary Public, on this 17th day of August, 2017.

Notary Public

My Commission Expires:

3/26/2018



ARKANSAS STATE BOARD OF NURSING

By: Ramonda Housh, APRN
Ramonda Housh, MNSc, APRN, CNP, C-PNP, President

Dated: 9/13/17