

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
RENEWAL OF REGISTERED NURSE
LICENSE

SHANE M. RENNER,
APPLICANT.

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:
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:
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:

ORDER GRANTING
LIMITED LICENSE

0005810

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

Shane M. Renner
678 Wisconsin Street
Eau Claire, WI 54703

Wisconsin Board of Nursing
P.O. Box 8366
Madison, WI 53708-8366

The parties in this matter agree to the terms and conditions of the attached Stipulation as the final disposition of this matter, subject to the approval of the Wisconsin Board of Nursing (Board). The Board has reviewed this Stipulation and considers it acceptable.

Accordingly, the Board in this matter adopts the attached Stipulation and makes the following Findings of Fact, Conclusions of Law and Order.

FINDINGS OF FACT

1. Shane M. Renner (Applicant) filed an application for renewal of his Wisconsin Registered Nurse license (no. 185660-30). Such license, first issued to Applicant on January 30, 2012, was scheduled for renewal by February 28, 2018. Applicant's request to renew was timely.

2. Applicant's most recent address on file with the Wisconsin Department of Safety and Professional Services is 678 Wisconsin Street, Eau Claire, Wisconsin 54703.

3. Information received in the application process reflects that Applicant has the following convictions:

a. On or about November 7, 2017, Applicant was convicted of Possession of Methamphetamine, a felony.

- b. On or about November 7, 2017, Applicant was convicted of two counts of felony Bail Jumping.
4. Information received in the application process reflects that the applicant has a diagnosis of poly-substance use and is methamphetamine-dependent.

CONCLUSIONS OF LAW

1. The Board has jurisdiction to act in this matter pursuant to Wis. Stat. § 441.07 and is authorized to enter into the attached Stipulation pursuant to Wis. Stat. §§ 15.08(5)(c) and 227.44(5).
2. The Board may deny the renewal of a license if the registered nurse committed a violation of Wis. Stat. § 441.07(1g).
3. By the conduct stated in the Findings of Fact, Applicant violated Wis. Stat. § 441.07(1g)(c) by committing acts which show Applicant to be unfit or incompetent by reason of abuse of alcohol or other drugs.
4. By the conduct stated in the above Findings of Fact, Applicant violated Wis. Stat. § 441.07(1g)(b) and Wis. Admin. Code §§ N 7.03(2) as Applicant's felony convictions are substantially related to the practice of nursing.

ORDER

1. The attached Stipulation is accepted.
2. Applicant's renewal of his Registered Nurse license is granted subject to the following limitations.
3. The professional license issued to Applicant (license no. 185660-30) to practice nursing in the state of Wisconsin, and his privilege to practice in Wisconsin pursuant to the Nurse Licensure Compact, is LIMITED as follows:

CONDITIONS AND LIMITATIONS

Treatment Required

- A.1. Applicant shall enroll and participate in a drug and alcohol treatment program with a Treater acceptable to the Board or its designee. Applicant shall participate in, cooperate with, and follow all treatment recommended by Treater.
- A.2. Applicant shall immediately provide Treater with a copy of this Order and all other subsequent orders.
- A.3. Treater shall be responsible for coordinating Applicant's rehabilitation and treatment 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 (See B.1., below). If Treater is unable or unwilling to serve as

required by this Order, Applicant shall immediately seek approval of a successor Treater by the Board or its designee.

- A.4. The treatment program shall include individual and/or group therapy sessions at a frequency to be determined by Treater. Therapy may end only with the approval of the Board or its designee, after receiving a petition for modification as required by B.5., below.
- A.5. 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 drug and alcohol treatment.
- A.6. Enrollment in the drug and alcohol treatment program shall occur within thirty (30) calendar days from the date of this Order.

Releases

- A.7. Applicant shall provide and keep on file with Treater, all treatment facilities and personnel, laboratories and collection sites, current releases complying with state and federal laws. The releases shall allow the Board, its designee, and any employee of the Department of Safety and Professional Services, Division of Legal Services and Compliance to: (a) obtain all specimen screen results and patient health care and treatment records and reports, and (b) discuss the progress of Applicant's treatment and rehabilitation with Treater, treatment facilities and personnel, laboratories and collection sites. Copies of these releases shall immediately be filed with the Department Monitor.

AA/NA Meetings

- A.8. Applicant shall attend Narcotics Anonymous and/or Alcoholics Anonymous meetings or an approved equivalent program for recovering professionals, at the frequency recommended by Treater, but no less than twice per week. Attendance of Applicant at such meetings shall be verified by the speaker or chair and reported quarterly to Treater and the Department Monitor.

Sobriety

- A.9. Applicant shall abstain from all personal use of alcohol.
- A.10. 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. Applicant shall disclose Applicant's drug and alcohol history and the existence and nature of this Order to the practitioner prior to the practitioner ordering the controlled substance. Applicant shall at the time the controlled substance is ordered immediately sign a release in compliance with state and federal laws authorizing the practitioner to discuss Applicant's treatment with, and provide copies of treatment records to, Treater and the Board or its designee. Copies of these releases shall immediately be filed with the Department Monitor.

- A.11. Applicant shall provide the Department Monitor with a list of over-the-counter medications and drugs that they may take from time to time. Applicant shall abstain from all use of over-the-counter medications, products, or other substances (including but not limited to natural substances, such as poppy seeds or any products containing alcohol) which may mask consumption of controlled substances or alcohol, create false positive screening results, or otherwise interfere with Applicant's test results, treatment or rehabilitation, unless ordered by a physician and approved by Treater, in which case the drug must be reported as described in paragraph A.12. It is Applicant's responsibility to educate himself about the medications and substances which may violate this paragraph, and to avoid those medications and substances.
- A.12. Applicant shall report to Treater and the Department Monitor all prescription medications and drugs taken by Applicant. Reports must be received within twenty-four (24) hours of administration, fill or refill 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.13. Applicant shall enroll and begin participation in a drug and alcohol monitoring program which is approved by the Department (Approved Program).
- A.14. At the time Applicant enrolls in the Approved Program, 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, nail, hair, saliva or other specimen at a collection site designated by the Approved Program within five (5) hours of notification of a test.
- A.15. The Approved Program shall require the testing of specimens at a frequency of not less than forty-nine (49) times per year, for at least the first year of this Order. Thereafter the Board may adjust the frequency of testing on its own initiative at any time.
- A.16. If any urine, blood, sweat, nail, 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.17. 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 specimens; (b) furnish any specimen in a directly witnessed manner; or (c) submit specimens on a more frequent basis.
- A.18. 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.
- A.19. The Approved Program shall submit information and reports to the Department Monitor as directed.

Practice Limitations

- A.20. Applicant shall not work as a nurse or other health care provider in a setting in which Applicant has access to controlled substances.
- A.21. Applicant shall practice only under the direct supervision of a licensed nurse or other licensed health care professional approved by the Board or its designee, who has received a copy of this Order.
- A.22. Applicant shall practice only in a work setting pre-approved by the Board or its designee. Requests for preapproval must be accompanied by a current job description, name and contact information of the direct supervisor, and written acknowledgment from the employer that a copy of this Order has been received and that the restrictions will be accommodated.
- A.23. Applicant may not work in a home health care, hospice, pool nursing, assisted living, agency, or as a nurse in a correctional setting.
- A.24. Prior to commencing practice, Applicant shall provide a copy of this Order and all other subsequent orders immediately to supervisory personnel at all settings where Applicant works as a nurse or care giver or provides health care, currently or in the future.
- A.25. It is Applicant's responsibility to arrange for quarterly written reports to be submitted to the Department Monitor from his or her supervisor at each setting in which Applicant practiced nursing in the previous quarter. These reports shall be submitted as directed by the Department Monitor, and shall assess Applicant's work performance, and shall include the number of hours of active nursing practice worked during that quarter. If a report indicates poor performance, the Board may institute appropriate corrective limitations, or may suspend Applicant's nursing license(s), in its discretion.
- A.26. Applicant shall report to the Board any change of employment status, residence, address or telephone number within five (5) days of the date of a change.

- A.27. Pursuant to Uniform Nurse Licensure Compact regulations, Applicant's nursing practice is limited to Wisconsin during the pendency of this limitation.

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
Division of Legal Services and Compliance
Department of Safety and Professional Services
P.O. Box 7190, Madison, WI 53707-7190
Telephone (608) 267-3817; Fax (608) 266-2264
DSPSMonitoring@wisconsin.gov

You may also submit this information via DSPS' Case Management System, here:
<https://app.wi.gov/DSPSMonitoring>

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 submit self-reports to the Department Monitor on a quarterly basis, as directed by the Department Monitor. The reports shall include a summary of Applicant's compliance with the terms and conditions of the Order in the previous quarter, Applicant's current address and home telephone number. The self-report shall not be considered formal change of address notification pursuant to Wis. Stat. § 440.11.

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, however no such petition for modification shall occur earlier than one (1) year from the date of the Order. Any petition for modification shall be accompanied by a written recommendation from Applicant's Treater expressly supporting the specific modifications sought. 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 termination of this Order any time after five (5) years from the date of the Order. The Board may grant a petition for full licensure upon a showing by Applicant of continuous, successful compliance for a period of at least five (5) years with the terms of this Order, including at least 600 hours of active nursing practice for each year.

Costs of Compliance

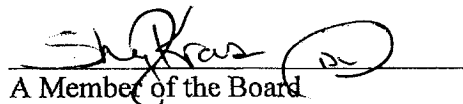
- B.7. Applicant shall be responsible for all costs and expenses incurred in conjunction with the monitoring, screening, supervision and any other expenses associated with compliance with the terms of this Order. Being dropped from a program for non-payment is a violation of this Order.

Suspension and Referral of Violations

- B.8. The Board or its designee may, without hearing, suspend Applicant's nursing license upon receipt of information that Applicant is in violation of any provision of this Order. The Board or its designee may, in conjunction with the suspension, prohibit Applicant from seeking termination of the suspension for a specified period of time.
- B.9. The Board or its designee may terminate the suspension if provided with sufficient information that Applicant is in compliance with the Order and that it is appropriate for the suspension to be terminated. Whether to terminate the suspension shall be wholly in the discretion of the Board or its designee.
- B.10. The Board may refer any violation of this Order to the Division of Legal Services and Compliance for investigation and action.
- B.11. This Order is effective on the date of its signing.

WISCONSIN BOARD OF NURSING

By:


A Member of the Board

7/10/18
Date

STATE OF WISCONSIN
BEFORE THE BOARD OF NURSING

IN THE MATTER OF APPLICATION FOR
RENEWAL OF A REGISTERED NURSE
LICENSE

SHANE M. RENNER,
APPLICANT.

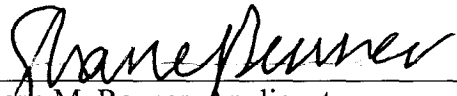
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STIPULATION

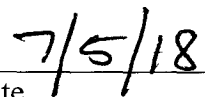
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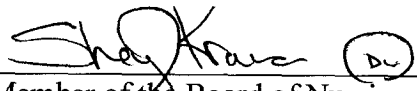
It is stipulated between the Applicant and the Wisconsin Board of Nursing as follows:

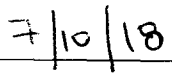
1. The Applicant has filed an application to renew a professional nurse license.
2. Information received by the Board reflects a basis for denial of the renewal of the licensure.
3. Based upon the information of record herein, the Board agrees to issue, and the Applicant agrees to accept, an Order granting a renewal of license as a professional nurse, subject to the terms and conditions set forth in the attached Order adopting the Stipulation.
4. Applicant understands that by signing this Stipulation, Applicant voluntarily and knowingly waives the following rights:
 - the right to request a hearing related to the denial of the application;
 - the right to confront and cross-examine the witnesses against Applicant;
 - the right to call witnesses on Applicant's behalf and to compel their attendance by subpoena;
 - the right to testify on Applicant's own behalf;
 - the right to file objections to any proposed decision and to present briefs or oral arguments to the officials who are to render the final decision;
 - the right to petition for rehearing; and
 - all other applicable rights afforded to the Applicant under the United States Constitution, the Wisconsin Constitution, the Wisconsin Statutes, the Wisconsin Administrative Code, and other provisions of state or federal law.
5. Applicant is aware of Applicant's right to seek legal representation and has been provided an opportunity to obtain legal counsel before signing this Stipulation.
6. Applicant agrees to the adoption of the attached Order Granting Limited License by the Board. The parties to the Stipulation consent to the entry of the attached Order Granting Limited License without further notice, appearance, or consent of the parties.

7. Applicant waives all rights to any appeal of the Board's Order, as adopted in the form as attached.
8. Applicant is informed that the Order Granting Limited License is a public record and will be published in accordance with standard procedure.
9. Applicant is informed that the Order Granting Limited License is an encumbrance as defined by the Nurse Licensure Compact (NLC) and the Applicant's multi-state license and/or privilege, if any, will be subject to all terms and conditions of the NLC.


Shane M. Renner, Applicant
678 Wisconsin Street
Eau Claire, WI 54703
License no. 185660-30


Date


A Member of the Board of Nursing
Department of Safety and Professional Services
P.O. Box 7190
Madison, WI 53707-7190


Date