

## WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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

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IN THE MATTER OF APPLICATION FOR  
RENEWAL OF A  
LICENSED CLINICAL SOCIAL WORKER  
CREDENTIAL

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ORDER GRANTING  
LIMITED LICENSE

LORRIE E. BURNS,  
APPLICANT.

**ORDER 0007767**

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

Lorrie E. Burns  
Madison, WI 53704

Social Worker Section  
4822 Madison Yards Way  
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 resolution of this renewal application. The Social Worker Section of the Wisconsin Marriage and Family Therapy, Professional Counseling, and Social Work Examining Board (Section) adopts the attached Stipulation and makes the following Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

1. On or about March 1, 2021, Lorrie E. Burns (Applicant) filed an application to renew her Licensed Clinical Social Worker credential (#6720-123).
2. Applicant has the following:
  - A. On or about September 29, 2020 -- Operating While Intoxicated 1st, an ordinance violation.
    - i. The police report states that Applicant attempted to conduct a U-turn and hit another car. Applicant reported she consumed eight (8) shots prior to driving. The report states Applicant's stepson was a passenger in the vehicle. He told police that Applicant was picking him up from work. He advised that Applicant frequently picks him up while drunk or

high, and that Applicant frequently uses marijuana and drinks alcohol. The police observed Applicant smelled of intoxicants, slurred her words, and that Applicant's responses were extremely delayed. Applicant had glossy eyes and wide pupils. Police observed that Applicant had an extremely difficult time exiting her vehicle, Applicant stumbled, fell, swayed back and forth, and was deemed unsafe to attempt the Standard Field Sobriety Tests. Applicant's intoximeter test had a Preliminary Breath Test (PBT) of .27.

- ii. Applicant's Driver Safety Plan dated November 17, 2020, found alcohol dependence.
  - iii. In Applicant's current use statement dated March 30, 2021, Applicant admitted having a few relapses in which Applicant consumed alcohol at home. Applicant states she has maintained sobriety for several months and actively engaged in outpatient alcohol and drug treatment.
- B. On or about July 6, 2021, the Section requested the Applicant undergo an Alcohol Other Drug Abuse (AODA) and for the Applicant to provide a detailed current use statement.
- C. The Section received an AODA assessment dated August 4, 2021, which noted:
- i. Applicant was diagnosed with Alcohol Use Disorder, Severe, in early remission.
  - ii. Applicant reported her last use of alcohol was around June 2, 2021, when she drank one (1) margarita.
  - iii. Applicant reported her alcohol use has negatively impacted her responsibilities at work, such as diminished quantity of work accomplished (including shifting patient appointments).
  - iv. The assessment recommends Applicant:
    - a. Maintain complete abstinence from all substances,
    - b. Submit to regular random urine analysis testing,
    - c. Consider attendance at support meetings at least weekly, and
    - d. Continue regular therapy at Behavioral Health and Recovery.
- D. Applicant submitted a detailed current use statement dated September 17, 2021, which noted:
- i. Applicant states her sobriety date is January 28, 2021.

- ii. Applicant began individual therapy on June 8, 2021, and attends regular therapy to assist Applicant in maintaining her relapse prevention plan.
- iii. Applicant identified anxiety as a precursor for her past alcohol use and is currently under the care of a physician for her medication management.

3. In resolution of this matter, Applicant consents to the entry of the following Conclusions of Law and Order.

#### CONCLUSIONS OF LAW

1. The Section has jurisdiction to act in this matter pursuant to Wis. Stat. §§ 457.08(4), 457.20, and is authorized to enter the attached Stipulation pursuant to Wis. Stat. §§ 15.08(5)(c) and 227.44(5).

2. Pursuant to Wis. Stat. § 440.08(4), the Section may deny a renewal if it is necessary to protect the public health, safety, or welfare.

3. Pursuant to Wis. Stat. § 457.26(2)(f), the Section may deny or limit a credential if Applicant engaged in unprofessional or unethical conduct in violation of the code of ethics established in the rules promulgated under § 457.03(2).

4. Pursuant to Wis. Stat. § 457.26(2)(h), the Section may deny or limit a credential if Applicant Violated Wis. Stat. ch. 457 or any rule promulgated under this chapter.

5. Pursuant to Wis. Admin. Code § MPSW 20.02(9), it is unprofessional conduct to practice or attempt to practice while the credential holder is impaired due to the utilization of alcohol or other drugs, or as a result of an illness which impairs the credential holder's ability to appropriately carry out the functions delineated under the credential in a manner consistent with the safety of a client, patient, or the public.

6. Applicant's substance abuse disorder is an illness which impairs Applicant's ability to appropriately carry out the functions delineated under the credential in a manner consistent with the safety of a client, patient, or the public.

7. Applicant's OWI 1st violation, her high BAC, her diagnosis of Alcohol Use Disorder, Severe, and less than one (1) year of sobriety, render denial of unlimited renewal of Applicant's credential necessary to protect the public health, safety, or welfare.

8. As a result of the above conduct, Applicant is subject to limitations on her credential pursuant to Wis. Stat. §§ 440.08(4), 457.26(2)(f) and 457.26(2)(h), and Wis. Admin. Code § MPSW 20.02(9).

## ORDER

1. The attached Stipulation is accepted.
2. Limitations upon Applicant's Licensed Clinical Social Worker credential are necessary to ensure that she is fit and competent to practice as a Licensed Clinical Social Worker.
3. Applicant's ability to practice as an Licensed Clinical Social Worker in the state of Wisconsin is LIMITED as follows:
  - A. For a period of at least three (3) years from the date of this Order Applicant shall comply with the following requirement relating to drug and alcohol monitoring:
    - i. Within thirty (30) days of the date of this Order, Applicant shall enroll and participate in a drug and alcohol monitoring program which is approved by the Department (Approved Program).
    - ii. At the time Applicant enrolls in the Approved Program, Applicant shall review 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:
      1. Contact with the Approved Program as directed on a daily basis, including vacations, weekends and holidays.
      2. 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.
      3. The Approved Program shall require the testing of specimens at a frequency of not less than forty-eight (48) times per year, (one (1) of which may be a hair test at the Section's discretion) for at least the first year of this Order. Thereafter, the Section may adjust the frequency of testing on its own initiative at any time.
    - iii. Applicant shall abstain from all personal use of alcohol.
    - iv. 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, the Section or its designee. Copies of these releases shall immediately be filed with the Department of Safety and Professional Services Monitor (Department Monitor).

- v. Applicant shall report to the Department Monitor all prescription medications and drugs taken by Applicant. Reports must be received within twenty-four (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.
  - vi. Applicant shall provide the Department Monitor with a list of over-the-counter medications and drugs that she may take from time to time. Over-the-counter medications and drugs that mask the consumption of controlled substances or of alcohol, create false positive screening results, or interfere with Applicant's treatment and rehabilitation, shall not be taken unless ordered by a physician, in which case the drug must be reported as described in the paragraph 3.A.v.
  - vii. All positive test results are presumed valid and may result in automatic suspension of licensure by the Section or the Section's designee. Applicant must prove by a preponderance of the evidence an error in collection, testing, fault in the chain of custody or other valid defense.
  - viii. 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 Section or its designee shall determine to be appropriate to clarify or confirm the positive or suspected positive test results.
- B. For a period of a least three (3) years from the date of this Order, Applicant shall comply with following mental health treatment requirements:

- i. Within thirty (30) days of the date of this order, Applicant shall provide proof to the Department Monitor that Applicant is continuing mental health treatment with a mental treatment provider (Treater), whose credential is in good standing, and approved by the Section. Applicant shall participate in, cooperate with, and follow all treatment recommended by Treater.
  - ii. Applicant shall immediately provide Treater with a copy of the Order and all subsequent orders.
  - iii. Applicant's treatment shall include individual and/or group therapy sessions at a frequency to be determined by Treater, but not less than once a month. Therapy may end only upon a determination by the Section or its designee after receiving a petition for modification, including a recommendation from Treater expressly approving termination of therapy.
  - iv. Treater 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 Section or its designee.
- C. For a period of at least three (3) years from the date of this Order Applicant shall comply with the following Alcohol and Other Drug Abuse (AODA) support group and relapse prevention plan requirements:
  - i. Applicant shall attend Alcoholics Anonymous meetings, Narcotics Anonymous meetings, or other Section-approved equivalent program for recovering professionals, no less than once per week. Applicant shall provide proof of attendance on a quarterly basis to the Department Monitor.
  - ii. Within thirty (30) days of the date of this Order, Applicant shall complete and submit a relapse prevention plan which shall address, but is not limited to, the following items:
    - 1. Describe your attitude about sobriety and what will help you sustain your motivation/commitment to sobriety;
    - 2. Identify your goals;
    - 3. What motivates you;
    - 4. What consequences are likely if you relapse;
    - 5. Identify your triggers and/or warning signs, and your specific plan to avoid drinking or using;
    - 6. Who will you contact for support and assistance;

7. Emergency planning; what you will do if you encounter a crisis or a stressful situation that triggers a strong urge to use or drink;
8. Changing your routine is important in staying sober; how will you begin and end each day in a way that supports sobriety and recovery;
9. Do you foresee any obstacles/barrier to implementing this plan? What will you do about these roadblocks?
10. How will you remain accountable?

iii. 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 Respondent's compliance with the terms and conditions of the Order in the previous quarter and provide an update on Applicant's relapse prevention plan follow through.

D. For a period of at least three (3) years from the date of this Order, Applicant shall comply with the following practice limitations:

- i. Applicant shall provide Applicant's social work employer with a copy of this Order before engaging in, or continuing to engage in, any social work employment. Applicant shall provide the Department Monitor with written acknowledgment from each social work employer that a copy of this Order has been received. Such acknowledgment 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.
- ii. Applicant shall report to the Section any change of employment status, residence, address or telephone number within five (5) days of the date of change.
- iii. Applicant shall commit no new violations of law and shall report all law enforcement contacts leading to arrest, charge or conviction, including DWI/OWI and municipal/ordinance violations, to the Department Monitor within forty-eight (48) hours of any such event, including any convictions resulting from pending charges.

4. Applicant may petition the Section 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 this Order. Denial of a petition in whole or in part shall not be considered a denial of a credential 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.

5. After three (3) consecutive years of successful compliance, including at least six hundred (600) hours of approved social work practice each year, the Applicant may petition the



Section for return of full licensure. The Section may grant or deny any petition, in its discretion, or may modify this Order as it sees fit.

6. 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](mailto:DSPSMonitoring@wisconsin.gov)

You may also submit this information online via DSPS Monitoring Case management System, here: <https://dpsmonitoring.wi.gov>

7. In the event Applicant violates any term of this Order, Applicant's credential, or Applicant's right to renew her credential, may, in the discretion of the Section or its designee, be SUSPENDED, without further notice or hearing. The Section 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 Section or its designee. The Section 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.

8. 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.

9. This Order is effective on the date of its signing.

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

By: *Dr. Cynthia C. Adell* *ALC*  
A Member of the Section

01/11/2022  
Date

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

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IN THE MATTER OF APPLICATION FOR  
RENEWAL OF A  
LICENSED CLINICAL SOCIAL WORKER  
CREDENTIAL

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STIPULATION

LORRIE E. BURNS,  
APPLICANT.

**ORDER 0007767**

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It is stipulated between Applicant and the Social Worker Section of the Wisconsin Marriage and Family Therapy, Professional Counseling, and Social Work Examining Board (Section) as follows:

1. Applicant filed an application to renew a Licensed Clinical Social Worker credential.
2. Information received by the Section reflects a basis for denial of licensure.
3. Based upon the information of record, the Section agrees to issue, and Applicant agrees to accept, an Order granting a Licensed Clinical Social Worker credential, 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 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 Section. 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 Section'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.

*Lorrie E. Burns*

Lorrie E. Burns  
Madison, WI 53704  
Credential #6720-123

*11/29/21*

Date

A Member of the Social Worker Section  
Department of Safety and Professional Services  
P.O. Box 8935  
Madison, WI 53708-8935

Date

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Lorrie E. Burns  
Madison, WI 53704  
Credential #6720-123

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Date

*Dr. Cynthia C. Adell* *SSC*  
A Member of the Social Worker Section  
Department of Safety and Professional Services  
P.O. Box 8935  
Madison, WI 53708-8935

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01/11/2022  
Date