WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



Wisconsin Department of Safety and Professional Services Access to the Public Records of the Reports of Decisions

This Reports of Decisions document was retrieved from the Wisconsin Department of Safety and Professional Services website. These records are open to public view under Wisconsin's Open Records law, sections 19.31-19.39 Wisconsin Statutes.

Please read this agreement prior to viewing the Decision:

• The Reports of Decisions is designed to contain copies of all orders issued by credentialing authorities within the Department of Safety and Professional Services from November, 1998 to the present. In addition, many but not all orders for the time period between 1977 and November, 1998 are posted. Not all orders issued by a credentialing authority constitute a formal disciplinary action.

• Reports of Decisions contains information as it exists at a specific point in time in the Department of Safety and Professional Services data base. Because this data base changes constantly, the Department is not responsible for subsequent entries that update, correct or delete data. The Department is not responsible for notifying prior requesters of updates, modifications, corrections or deletions. All users have the responsibility to determine whether information obtained from this site is still accurate, current and complete.

• There may be discrepancies between the online copies and the original document. Original documents should be consulted as the definitive representation of the order's content. Copies of original orders may be obtained by mailing requests to the Department of Safety and Professional Services, PO Box 8935, Madison, WI 53708-8935. The Department charges copying fees. *All requests must cite the case number, the date of the order, and respondent's name* as it appears on the order.

• Reported decisions may have an appeal pending, and discipline may be stayed during the appeal. Information about the current status of a credential issued by the Department of Safety and Professional Services is shown on the Department's Web Site under "License Lookup."

The status of an appeal may be found on court access websites at: http://ccap.courts.state.wi.us/InternetCourtAccess and http://www.courts.state.wi.us/wscca

•Records not open to public inspection by statute are not contained on this website.

By viewing this document, you have read the above and agree to the use of the Reports of Decisions subject to the above terms, and that you understand the limitations of this on-line database.

Correcting information on the DSPS website: An individual who believes that information on the website is inaccurate may contact <u>DSPS@wisconsin.gov</u>



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

Kathryn Coffin Marshville, NC 28103

Wisconsin Board of Nursing P.O. Box 8366 Madison, WI 53705-5125

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. Kathryn Coffin, (Applicant) has filed an application for reinstatement of a Wisconsin professional nurse license (application no. #807594, credential no. #137614-30).

2. Applicant's most recent address on file with the Wisconsin Department of Safety and Professional Services (Department) is located in Marshville, North Carolina.

3. On May 14, 2020, the Wisconsin Board of Nursing ("Board") issued Final Decision and Order #0006800 ("Order") accepting the voluntary surrender of Respondent's professional nursing license. For Respondent to reapply for her professional nursing license, there are certain terms and conditions Respondent must adhere to including, but not limited to, completion of an assessment by an approved mental health provider experienced in evaluating health care practitioners' fitness for duty. The Order further states that Respondent's license shall be limited in a manner to address any concerns the Board has with the conduct set out in the Order's findings of fact and to address any recommendations resulting from the assessment. 4. On March 10, 2022, the Board reviewed and accepted the report resulting from Respondent's fitness for duty assessment. Based on the assessor's recommendations, the following is entered:

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

CONCLUSIONS OF LAW

1. The Wisconsin Board of Nursing 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 a license if the Applicant committed a violation of Wis. Stat. § 441.07(1g).

3. By the conduct described in the Findings of Fact, Applicant violated Wis. Stat. \S 441.07(lg)(b), (c), and (d), Wis. Admin. Code \S N 7.03(1)(b) by having a license to practice nursing denied, revoked, suspended, limited, or having the credential holder otherwise disciplined in another state, territory, or country.

4. By the conduct described in the Findings of Fact, Applicant violated Wis. Stat. §§ 441.07(lg)(b), (c), and (d), Wis. Admin. Code § N 7.03(2) by violating or aiding and abetting a violation of any law substantially related to the practice of nursing or being convicted of any crime substantially related to the practice of nursing.

5. By the conduct described in the Findings of Fact, Applicant violated Wis. Stat. §§ 441.07(lg)(b), (c), and (d), Wis. Admin. Code § N 7.03(6)(f), by being unable to practice safely by reason of alcohol or another substance.

6. Pursuant to the terms of Order #0006800, the Board may limit Applicant's license in a manner to address any concerns the Board has as a result of the conduct set out in the Findings of Fact of that Order and to address any recommendations resulting from a fitness to practice assessment.

7. As a result of the above conduct, Applicant is subject to limitations on her license pursuant to Wis. Stat. 441.07(1g)(b) and (d).

<u>ORDER</u>

1. The attached Stipulation is accepted.

2. Limitations upon Applicant's license are necessary to ensure that applicant is fit and competent to practice as a professional nurse. Applicant is granted reinstatement of a professional nurse license subject to the following limitations, terms, and conditions.

3. The professional nurse license issued to Applicant to practice professional nursing in the state of Wisconsin 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 C.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 C.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.

<u>Releases</u>

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. Applicant shall receive prescriptions for controlled substances from one practitioner, not multiple practitioners. Applicant shall disclose the name and address of such practitioner to the Department Monitor within five (5) business days of receipt of a prescription for controlled substances.
- 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 herself 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 Monitors as directed.

Practice Limitations

- 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 not practice in any setting where the Applicant has access to controlled substances.
- A.23. 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.24. 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. Applicant shall provide Applicant's nursing employer with a copy of this Order before engaging in, or continuing to engage in, any nursing employment. Applicant shall provide the Department Monitor with written acknowledgment from each nursing 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.

A.25. 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.

MISCELLANEOUS

Department Monitor

C.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 online via DSPS' Monitoring Case management System, here:

https://app.wi.gov/DSPSMonitoring

Required Reporting by Applicant

- C.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.
- C.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

C.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

- C.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 initial 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.
- C.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 under a regular limited registered nursing license.

Costs of Compliance

C.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

- C.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.
- C.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.
- C.10. The Board may refer any violation of this Order to the Division of Legal Services and Compliance for investigation and action.
- C.11. This Order is effective on the date of its signing.

Dated this <u></u> day of <u></u> 2022.

STATE OF WISCONSIN BOARD OF NURSING

By: A Member of the Board

Esept 2022

IN THE MATTER OF APPLICATION FOR A PROFESSIONAL NURSE LICENSE	:	:
	:	STIPULATION
KATHRYN COFFIN, APPLICANT.	• • •	ORDER 0008 142

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

1. Applicant has filed an application for reinstatement of a professional nurse license.

2. Information received by the Board reflects a basis for denial of the license.

3. Based upon the information of record herein, the Board agrees to issue, and Applicant agrees to accept, an Order granting reinstatement of a professional nurse license, 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 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 Enhanced Nurse Licensure Compact (Compact) and the Applicant's multi-state license and/or privilege, if any, will be subject to all terms and conditions of the Compact.

Kathryn Coffin, Applicant

Kathryn Coffin, Applicant/ Marshville, NC 28103 Application no. #807594

<u>8-21-2022</u>

Blatter

A Member of the Wisconsin Board of Nursing P.O. Box 8366 Madison, WI 53705-5125

____08/03/2022_____ Date