The attached are Primary Source Documents of the Idaho Board of Nursing for:

JOLENE GRONHOLZ
N-26709

Idaho Board of Nursing – PO Box 83720 – Boise, Idaho 83720-0061 – (208) 334-3110
BEFORE THE BOARD OF NURSING

STATE OF IDAHO

In the Matter of: JOLENE VIOLA HAMANN GRONHOLZ, License No. N-26709, Respondent. Case No. 98-03

FINDINGS OF FACT, CONCLUSIONS OF LAW, AND FINAL ORDER

Having reviewed the documents and correspondence contained in the administrative file in this matter, the Idaho Board of Nursing (hereinafter the “Board”) hereby enters the following Findings of Fact, Conclusions of Law, and Final Order:

FINDINGS OF FACT


2. On or about January 9, 1998, the Board received a complaint from the Respondent’s employer that the respondent confessed to taking Demerol and Fentanyl vials over several weeks for her own consumption. A true and correct copy of the complaint is attached hereto as Exhibit 1.

3. On or about January 20, 1998, Respondent voluntarily surrendered her license, admitting to violations of the Nursing Practice Act. A true and correct copy of the voluntary surrender form signed by Respondent is attached hereto as Exhibit 2.


5. On or about December 2, 2002, the South Dakota Board of Nursing submitted a Voluntary Surrender Consent Order indicating that the Respondent’s South
Dakota license had been suspended for diverting Demerol during the month of July 2002. A true and correct copy of the Consent Order is attached hereto as Exhibit 3.

6. On or about December 18, 2002, a Notice of Termination of Limited License was issued for failure to comply with terms and conditions of limited licensure. A true and correct copy of the Notice of Termination is attached hereto as Exhibit 4.

7. Following their regular meeting on January 10, 2003, the PRN Advisory Committee issued a Report of Non-Compliance for failure to maintain full compliance with terms of the Contract for Monitoring. A true and correct copy of the Report of Non-Compliance is attached hereto as Exhibit 5.

8. Respondent knowingly and freely waived her right to a hearing, and waived all rights granted to Respondent pursuant to the Administrative Procedures Act, chapter 52, title 67, Idaho Code.

CONCLUSIONS OF LAW

1. As a licensed nurse in the State of Idaho, Respondent is subject to the jurisdiction of the Board and to the provisions of title 54, chapter 14, Idaho Code, and the rules and regulations promulgated by the Board thereunder.

2. The allegations in the complaint, if proven, would constitute violations of the Nursing Practice Act and Rules and constitute grounds for revocation or suspension of Respondent’s license to practice nursing pursuant to Idaho Code § 54-1413(1)(e), (g),(i), and IDAPA 23.01.01.100.06, 10, and 101.03.e., 05.e.

3. Respondent’s voluntary surrender of licensure authorizes the Board to revoke or suspend Respondent’s license without further process pursuant to Idaho Code § 54-1413(3).

ORDER

NOW, THEREFORE, IT IS HEREBY ORDERED, based upon the foregoing Findings of Fact and Conclusions of Law, and good cause being shown, that Nursing License No. N-26709 issued to Respondent Jolene Viola Hamann Gronholz is

FINDINGS OF FACT, CONCLUSIONS OF LAW AND FINAL ORDER - 2
Revoked

Suspended _____ days/year(s) _____ indefinitely based upon voluntary surrender, and is subject to subsequent review pursuant to Idaho Code § 54-1413(4).

It is further ordered that, should Respondent request reinstatement of licensure in the future, that she present the following information to the Board with her application for reinstatement:

1. Evidence of abstinence from the use of non-medically prescribed drugs and alcohol;
2. Documentation that she is rehabilitated and competent to practice nursing by submitting:
   a. A comprehensive drug/alcohol evaluation completed by a qualified health care provider at the time of application for reinstatement;
   b. A detailed summary of employment since licensure revocation or suspension; and
   c. Documentation of activities engaged in to address drug/alcohol issues, to include documentation of an active recovery program.
   d. Evidence of financial compliance with NCPS and the PRN program.

The Board reserves the right to assess investigative costs and attorney’s fees incurred in this matter as a condition of reinstatement.

This order is effective immediately.

DATED this 13th day of February, 2003.

IDAHO BOARD OF NURSING

By Charles Moseley, CRNA
Chair
NOTICE OF AVAILABLE RIGHTS

If respondent’s license was revoked, then pursuant to Board Rule 120.06, Respondent may not apply to the Board for reinstatement for two (2) years after the date of execution of this Order unless the Order specifies otherwise. At the time of application, the Board may conduct further evidentiary hearings pursuant to Board Rule 120 to determine whether to deny reinstatement, grant a reinstatement, or issue a license permitting the applicant to practice nursing under specified terms and conditions.

If respondent’s license was suspended Respondent may apply to the Board within a reasonable time after the execution of this Order, or as specified by the term of suspension. At the time of application, the Board may conduct further evidentiary hearings pursuant to Board Rule 120 to determine whether to deny reinstatement, grant a reinstatement, or issue a license permitting the applicant to practice nursing under specified terms and conditions.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 17th day of FEBRUARY 2003, I caused to be served a true and correct copy of the foregoing FINDINGS OF FACT, CONCLUSIONS OF LAW, AND FINAL ORDER addressed as follows:

Jolene Gronholz
607 N. East Park Street
Luverne MN 56156

X U.S. Mail, postage prepaid
X Certified U.S. Mail, return receipt
___ Hand Delivery
___ Overnight Mail
___ Facsimile:
___ Statehouse Mail

___________________________
Sandra Evans, M.A.Ed., R.N.
Executive Director
REPORT FORM FOR VIOLATION OF THE NURSING PRACTICE ACT

I. NAME OF COMPLAINANT
   Denise A. Haken, RN, ANS

II. IDENTIFYING INFORMATION ABOUT WHOM THE COMPLAINT IS BEING MADE:
   (Please check appropriate box)
   [ ] Registered Nurse  [ ] Nurse Practitioner
   [ ] Licensed Practical Nurse  [ ] Certified Registered Nurse Anesthetist
   [ ] Nursing Assistant  [ ] Other

   Name: Olene Grothold, RN
   Address: 174 W. Capri Ave.
   City/State: Kellogg, ID: 83837

   Employer:
   Name of Institution: Shoshone Medical Center
   City/State: Kellogg, ID: 83837

   Position: Surgery Department Manager

III. NATURE OF COMPLAINT:
   (Continue statements to actual incidents observed, giving dates, places and names of persons involved.)
   Explain what happened, where it happened, and the date and time it happened, and attach copies of relevant records, if possible.

   Tampering with Controlled Substance
   (Denial) Buprenorphine 12/17/98. Investigation followed. Missing fentanyl reported from Breastfeeding team in surgery on 12/19/98. Investigation followed with interrogation of patient and
   Xmas by local sheriff. Dar she confessed to taking Denovali pills over past few weeks and several
   fentanyl for her own consumption.
IV. Did any other person(s) witness this incident? If so, please give name(s), address(es), position(s) held, and telephone number(s), if known.

V. ADDITIONAL COMMENTS:

Date

Signature of Complainant

The identity of the complainant will remain confidential except when the complainant may be subpoenaed to testify in a formal hearing procedure.

AFFIDAVIT

On this 9th day of January, 1998, before me, Beverly Clift, notary public, personally appeared Debra Hille, known or identified to me, to be the person whose name is subscribed to the within instrument, and acknowledged to me that he/she executed the same.

WITNESS my hand and official seal.

Beverly Clift
Notary Public

Residing at Skowhegan County, My Commission expires 07/05/10.

EXHIBIT NO: 1
Page 2 of 2
VOLUNTARY SURRENDER OF LICENSURE

I

I, ____________________________, admit that:

after 8 1/3 yrs. of strong recovery, I relapsed.
I humbly surrender my license with the fervent desire to regain my sobriety, program and continue to practice nursing.

II

I understand and acknowledge that the admitted facts constitute grounds for disciplinary action under Section 54-1412, of the Nursing Practice Act, IDAHO CODE.

III

I hereby voluntarily surrender license number N-26709 and I shall forthwith discontinue the practice of nursing in Idaho.

IV

I hereby waive the right to a hearing concerning the foregoing admitted facts, and waive my rights under the provisions related to contested cases in the Administrative Procedures Act, Chapter 52, Title 67, IDAHO CODE.

Dated: 01-20-98

State Of Idaho
Board Of Nursing

LICENSE NUMBER
N-26709

Expire: August 31, 1999

JOLENE VIOLA CRONHOLZ
607 N EAST PARK
LUVERNE MN  56156

This is to certify that:

has complied with the requirements of the law and is entitled to practice as a LICENSED PROFESSIONAL NURSE (RN).

Signature of Licensee

Signature of Witness

EXHIBIT NO: 2
Page 1 of 1
IN THE MATTER OF THE LICENSURE PROCEEDINGS

RE: JOLENE GRONHOLZ, RN,

License No. R028072

Licensee

* * * * * * * * * * * * * * * * *

WHEREAS, JOLENE GRONHOLZ, RN, ("Licensee"), is licensed to practice as a registered nurse in the State of South Dakota and holds License number R028072; and

WHEREAS, Licensee's license placed on probation by the South Dakota Board of Nursing in July, 1998, and after successfully completing the Health Professionals Assistance Program was restored to an unencumbered licensure status on November 30, 2000, by action of the South Dakota Board of Nursing, and

WHEREAS, while employed at the Heart Hospital of South Dakota, it was discovered on or about July 27, 2002, that Licensee had diverted approximately 237 syringes of Demerol, a controlled substance, during the month of July, 2002; and

WHEREAS, said Licensee agrees that such conduct is a violation of SDCL § 36-9-49 (5), (7) and (10); and

WHEREAS, the South Dakota Board of Nursing has a statutory obligation to protect the public health, safety and welfare set forth in SDCL §36-9, including the protection of the public from unsafe practices and practitioners; and

WHEREAS, Licensee agrees that these matters are of a nature that would constitute
grounds for the discipline of her license to practice as a registered nurse in South Dakota under SDCL § 36-9-49; and

WHEREAS, the Licensee agrees that this Agreement is entered into by her voluntarily and without duress or compulsion, in full understanding of the legal consequences of this document and her rights; now, therefore,

IT IS HEREBY STIPULATED THAT THE BOARD MAY ENTER AN ORDER AS FOLLOWS:

1. That the Board has jurisdiction over the person of the Licensee and the subject matter of this Voluntary Surrender Consent Order.

2. Licensee while employed at the Heart Hospital of South Dakota, it was discovered on or about July 27, 2002, that Licensee had diverted approximately 237 syringes of Demerol, a controlled substance, during the month of July, 2002;

3. The Licensee has been given an opportunity to discuss this Voluntary Surrender Consent Order with an attorney of Licensee's choice, and is aware of Licensee's right to a hearing in this matter, and all rights under the United States and South Dakota Constitutions, laws, rules and/or regulations. Licensee hereby voluntarily waives all such rights to a hearing, notice, appearance, or any other rights under said Constitutions, laws, rules and/or regulations. Licensee also agrees that the Board's Executive Secretary or her designee may present this Voluntary Surrender Consent Order to the Board and disclose to the Board all items of their investigation, including, but not limited to, any communications with Licensee.

4. That the Licensee's license to practice as a registered nurse in South Dakota shall be suspended for an indefinite period from the date of this Order. Licensee may petition for reinstatement for "good" cause. If the Licensee's license is ever reinstated, Licensee shall be placed
upon a probationary term for a period of such years of employment as approved by the Board at the
time of reinstatement, under such terms and conditions of probation as approved by the Board at the
time of reinstatement.

5. Nothing in this Voluntary Surrender Consent Order and Agreement should imply
that the Licensee will be reinstated. Licensee recognizes that the reinstatement terms, as well as the
requirements for reinstatement are at the sole discretion of the Board and will be considered if and
when an application for reinstatement is filed.

6. Licensee shall return her current RN renewal certificate to the Board of Nursing
office with ten (10) days of the signed date of this Order.

7. It is further stipulated and agreed that this Voluntary Surrender Consent Order is
being entered into voluntarily by the Licensee and without threats or coercion and is entered into
after the Licensee has been given ample opportunity to consider these matters and to discuss this
Voluntary Surrender Consent Order with an attorney of Licensee's choice and that the Licensee has
a full understanding of the legal consequences of this Voluntary Surrender Consent Order and of
the Licensee's rights to a formal hearing on these matters, which rights are hereby waived by the
signing of this Voluntary Surrender Consent Order.

NOW, THEREFORE, the foregoing Voluntary Surrender Consent Order is entered into and
is respectfully submitted to the Board with the request that the Board adopt its terms as an order of
the Board in the above matter.

Dated this 12 day of October, 2002.

JOLENE GRONHOLZ, RN, Licensee

EXHIBIT NO: 3
Page 3 of 4
The South Dakota Board of Nursing meeting on the 14th day of November, 2002,

[approved](rejected) the attached Voluntary Surrender Consent Order (as written) (with the following modifications):

and issued its order consistent herewith as follows:

IT IS HEREBY ORDERED that the above Voluntary Surrender Consent Order is adopted shown herein by the South Dakota Board of Nursing this 14th day of November, 2002, by vote of 7 Yes 0 No 0 Abstain.

[Signature]
Gloria Damgaard, Executive Secretary

I certify that this is a true copy of a record on file in the Board of Nursing of the State of South Dakota.

[Signature]
Jean Mccune
Signature, Authorized Representative
Jolene Gronholz  
607 N East Park St  
Luverne MN  56156

Dear Ms. Gronholz:

NOTICE OF TERMINATION OF LIMITED LICENSE

You are hereby notified that limited license, number N-26709 issued under provisions in IDAPA 23.01.132 is terminated, effective immediately.

You are further notified that such action is deemed necessary in the interest of public health, safety and welfare due to failure to comply with the terms and conditions of limited licensure, by:

a. Diverting approximately 237 syringes of Demerol while employed at Heart Hospital of South Dakota, during the month of July 2002, resulting in the suspension of your South Dakota license.

Your file will be referred to the Advisory Committee for the Program for Recovering Nurses for review on January 10, 2003. You may request to meet with the Committee during their meeting by contacting Linda Coley, Management Assistant, (208) 334-3110 ext. 25 by January 2, 2003, to request an appointment time. Since you are currently located out of state and may not be able to personally attend this meeting, you may submit a written statement for the Committee to review during this meeting if you wish to continue in the program. Failure to respond to this letter may result in the issuance of a Report of Non-Compliance being filed with the Board with a recommendation of licensure revocation. In the meantime, you may not be employed as a licensed nurse in the state of Idaho.

Dated: December 18, 2002

SANDRA EVANS, MAEd, RN
Executive Director

EXHIBIT NO: 4
Page 1 of 2

The Mission of the Board of Nursing is to regulate nursing practice and education for the purpose of safeguarding the public health, safety and welfare.
Idaho Board of Nursing
LIMITED LICENSE
N-26709
RN XXX PN ___

JOLENE GRONHOLZ
514 Cameron Ave
Kellogg ID 83837

Failure to comply with stipulated terms may result in withdrawal and disciplinary action.

Expires: 06/04/2003  (See Reverse)

LIMITED LICENSE - Receipt

Receipt No: 23067
Amount $90.00

RN XXX LPN ___

DATE ISSUED 06.04.98

BY _________________ the

[Signature]

SENDER: COMPLETE THIS SECTION

[Box]

1. Article Addressed to:

Jolene Gronholz
607 N East Park St
Luverne MN 56156

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

D. Address on back or on front if space permits. If YES, enter delivery address below:

[Signature]

3. Service Type

☐ Certified Mail ☐ Registered ☐ Insured Mail
☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

[Box]

PS Form 3811, July 1999 Domestic Return Receipt

EXHIBIT NO: 4
Page 2 of 2
TO: SANDRA EVANS, MAEd, RN
Executive Director
Idaho Board of Nursing

FROM: Karen Ellis, RN, Chairperson
Program for Recovering Nurses

DATE: January 10, 2003

The file of Jolene Gronholz was reviewed at the Advisory Committee meeting on January 10, 2003, and found to be in non-compliance of recommendations because of the following:

Failed to comply with all terms and conditions of the Contract for Monitoring

The Committee made the following recommendation(s):

Refer to Board for disciplinary action.

File reviewed by Executive Director:

SANDRA EVANS
Signature 11/10/03

Action Recommended to Board: Execution

5530 West Emerald—Boise Idaho 83706
Office: (208) 323-9555—Fax: (208) 323-9222—Toll free: (800) 386-1695—Cellular: (208) 891-4726—Pager: (888) 250-8073
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**Recipient Information**

- **Name:** JOLENE GRONHOLZ
- **Address:** 607 N EAST PARK ST, LUTHER MN 56156
- **City, State:** LUVERNE MN 56156

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**Send To:**

- **Date:** 2/18/03
- **Postmark:** [Mark]

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**PS Form 3800, May 2000**

See Reverse for Instructions