

LETTER OF SURRENDER
FRANK W. MCCREARY, O.T.A.

Wanda R. Banks, M.A., OTR/L, Chair
Maryland State Board of Occupational Therapy Practice
Spring Grove Hospital Center
Tuerk Building, 2nd Floor
55 Wade Avenue
Baltimore, Maryland 21228

Re: **Frank W. McCreary, O.T.A., A01879**
Case No.: 2018-020
Letter of Surrender of Occupational Therapy Assistant License

Dear Ms. Banks:

I agree to voluntarily surrender my license to practice as an occupational therapy assistant ("OTA") in the state of Maryland, License Number A01879, to the Maryland State Board of Occupational Therapy Practice ("Board"). I understand that upon the surrender of my license, I may not engage in the practice as an OTA, with or without compensation, as defined in the Maryland Occupational Therapy Practice Act ("the Act"), Health Occ. §§ 10-101 *et seq.* and the Board's regulations, Code of Maryland Regulations ("COMAR") 10.46.01 *et seq.* and other applicable laws. I further understand that I am in the same position as an unlicensed OTA as of the effective date of this Letter of Surrender.

I understand that this Letter of Surrender shall become a **PUBLIC DOCUMENT** on the date of the Board's acceptance of this Letter of Surrender. I agree that this Letter of Surrender may be released or published by the Board as a final order of the Board. I understand that the Board will advise the National Practitioner Data Bank of this Letter of Surrender. I further understand that in the event I would apply for licensure in any form in any other state of jurisdiction, that this Letter of Surrender may be released by the Board to any other state licensing board. Upon the Board's acceptance of this Letter of Surrender, this Letter of Surrender becomes a **FINAL ORDER** of the Board.

On February 13, 2018, the Board informed me of a complaint against me involving allegations of unprofessional behavior and possible ethics violations. The complaint alleged that I engaged in a sexual and dual relationship with a female client. The Board initiated an investigation into the allegations. The Board's investigation concluded that I engaged in a sexual and dual relationship with a female client and exploited the professional relationship for my personal advantage. In lieu of further investigation by the Board and possible administrative disciplinary proceedings, I have decided to surrender

my Maryland OTA license. I have cooperated with the Board in its investigation of the allegations against me and complied with the Board's requests.

I understand the Board believes it has sufficient information to charge my OTA license with violations of the following provisions of the Act: Health Occ. § 10-315(3) (Commits any act of gross negligence, incompetence, or misconduct in the practice of occupational therapy or limited occupational therapy); (4) (Knowingly violates any provision of this title); and (5) (Violates any rule or regulation of the Board, including any code of ethics adopted by the Board).

I further understand that the Board believes it has sufficient information to charge my OTA license with violations of the following provisions of the Code of Maryland Regulations ("COMAR"): 10.46.02.01 A (The licensee shall... (3) Show respect for the client's rights...); 10.46.02.01 C (The licensee may not: (1) Engage in cruel, inhumane, or degrading practice in the treatment of the client); 10.46.02.02 A (the licensee shall avoid a relationship or an activity with the client that interferes with professional judgment and objectivity); and 10.46.02.02 B (the licensee may not: (1) Exploit the client sexually, physically, emotionally, socially, or in another manner; or (2) Engage in sexual misconduct which includes, but is not limited to, sexual behavior with the client or patient: (a) regardless of whether the behavior occurs in the context of a professional evaluation, treatment, procedure, or other service to the client or patient).

I also understand that if this matter proceeded to an evidentiary hearing before the Board, there may be sufficient evidence to find and conclude as a matter of law that I violated the above referenced sections of the Health Occupations Article and COMAR regulations, and that the Board could sanction my license accordingly. As such, I desire to surrender my OTA license.

I wish to state clearly that I have voluntarily, knowingly, and freely chosen to submit this Letter of Surrender. I do not wish to contest these allegations. I understand that, by executing this Letter of Surrender, I am waiving the right to contest the facts summarized in Paragraph 3 of this letter in any charges that would issue from the Board's investigative findings in a formal evidentiary hearing at which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other substantive and procedural protections provided by law, including the right to appeal.

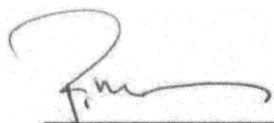
I hereby affirm that I am not presently practicing as an OTA. Specifically, I affirm that during the period of surrender: (1) I will not practice, attempt to practice, or offer to practice occupational therapy; and (2) I will not otherwise engage professionally with clients by personally providing services involving the application of occupational therapy principles and procedures in the treatment of individuals and groups. I acknowledge that on or before the effective date of this Voluntary Surrender, if I have not already done so, I

shall present to the Board my OTA license, including any renewal certificates and wallet-sized renewal cards.

I further recognize and agree that by submitting this Letter of Surrender, my license will remain surrendered unless and until the Board grants reinstatement. I agree not to apply for reinstatement before **FIVE YEARS** following the date the Board accepts this Letter of Surrender and that if I decide to apply for reinstatement as an OTA in Maryland, I will approach the Board in the same posture as one whose OTA license has been revoked. In the event that I apply for reinstatement, I understand that the Board or its successor is not required to grant reinstatement; and if it does grant reinstatement, may impose any terms and conditions the Board considers appropriate for public safety and the protection of the integrity and reputation of the profession. In considering my application for reinstatement of my OTA license, the Board may review my entire Board file, including any information the Board receives after the execution of this Letter of Surrender. I also understand that in considering any future application for reinstatement of my OTA license, the Board may require me to undergo medical, psychological, and/or psychiatric evaluations, and drug and alcohol testing to determine my fitness to have my OTA license reinstated. It will be my burden, as an applicant for reinstatement, to demonstrate that I meet the Board's requirement for licensure. I understand that if the Board reinstates my OTA license, it will be reinstated through the Board's disciplinary process and that my license will only be reinstated by the Board's issuance of a public order of reinstatement and that the Board may, in its discretion, place my reinstated license on probation subject to terms and conditions.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. I have been given an opportunity to consult with an attorney before signing this Letter of Surrender of my OTA license in Maryland. I fully understand the nature of the allegations that have been presented to the Board. I acknowledge that I understand and comprehend the language, meaning, and terms and effect of this Letter of Surrender. I have voluntarily, knowingly, and freely chosen to submit this Letter of Surrender.

Sincerely,



Frank W. McCreary

11/26/19

Date

NOTARIZATION

STATE OF Maryland
COUNTY/CITY OF: Carroll

I HEREBY CERTIFY that on this 26th day of November, 2019, before me, a Notary Public of the State of Maryland of the County/City aforesaid, personally appeared **FRANK W. MCCREARY** and declared and affirmed under penalties of perjury that signing the foregoing Letter of Surrender was his voluntary act and deed.

AS WITNESS my hand and Notarial seal.

Angela L. V.

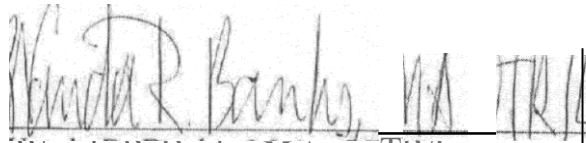
Notary Public

My commission expires: 12/8/2020

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ACCEPTANCE

ON BEHALF OF THE MARYLAND BOARD OF OCCUPATIONAL THERAPY PRACTICE, on this 5th day of December, 2019 I, Wanda R. Banks, accept **FRANK W. MCCREARY'S LETTER OF SURRENDER** of his Occupational Therapy Assistant License, License Number A01879, in the State of Maryland.



Wanda R. Banks, M.A., TR/L

Chair

Maryland State Board of Occupational Therapy Practice