

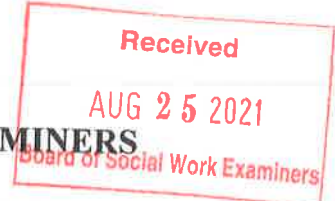
IN THE MATTER OF
MARC I. HAFKIN, LCSW-C

Respondent

License Number: 01563

* * * * *

* BEFORE THE MARYLAND
* STATE BOARD OF
* SOCIAL WORK EXAMINERS
* Case Number: 2019-2716



CONSENT ORDER

On August 14, 2020, the Maryland State Board of Social Work Examiners (the “Board”) charged **MARC I. HAFKIN, LCSW-C** (the “Respondent”), License Number 01563, with violating the Maryland Social Workers Act (the “Act”), Md. Code Ann., Health Occ. (“Health Occ.”) §§ 19-101 *et seq.* (2014 Repl. Vol. & 2019 Supp.).

Specifically, the Board charged the Respondent with violating the following provisions of the Act and COMAR:

Health Occ. § 19-311. Denials, reprimands, suspensions, and revocations – Grounds.

Subject to the hearing provisions of § 19-312 of this subtitle, the Board may deny a license to any applicant, fine a licensee, reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the applicant or licensee:

- (4) Commits any act of gross negligence, incompetence, or misconduct in the practice of social work;
- (5) Engaged in a course of conduct that is inconsistent with generally accepted professional standards in the practice of social work; [and]
- (6) Violates any provision of this title or regulations governing the practice of social work adopted and published by the Board[.]

COMAR 10.42.03.02 Definitions.

B. Terms defined.

(3) "Dual relationship" means a relationship in which the licensee is involved with the client professionally and in any other capacity.

...

(5) "Inappropriate sexual language" means:

(a) An eroticized or sexually provocative comment; or

(b) An inappropriate discussion of a sexual matter unrelated to client treatment.

...

(8) "Sexual harassment" means:

(a) A deliberate or repeated comment of a sexual nature unrelated to client treatment; or

(b) An advance, gesture, solicitation, request, intimidation, or physical contact of a sexual nature.

(9) "Sexual misconduct" means:

(a) Inappropriate sexual language; [or]

...

(c) Sexual harassment[.]

COMAR 10.42.03.03 Responsibilities to Clients.

B. The licensee may not:

(3) Exploit a relationship with a client for personal advantage or satisfaction[.]

COMAR 10.42.03.05 Relationships.

- A. The licensee may not enter into a dual relationship with a client or an individual with whom the client has a close personal relationship.
...
- D. The licensee may not engage in sexual misconduct with either current or former clients.

COMAR 10.42.03.06 Standards of Practice.

- A. Professional Competence. The licensee shall:
 - (3) Use interventions and assessment techniques only when the licensee knows that the circumstances justify those interventions and techniques;
...
 - (7) Document and maintain appropriate and accurate records of professional service, supervision, and research work;
...
- B. A licensee may not:
 - (1) Undertake or continue a professional relationship with a client when the competence or objectivity of the licensee is or could reasonably be expected to be impaired due to:
 - (a) Mental, emotional, physiological, pharmacological, substance abuse, or personal problems; or
 - (b) The licensee's present or previous familial, social, sexual, emotional, financial, supervisory, political, administrative, legal, or other relationship with the client or a person associated with or related to the client[.]

On September 24, 2020 and March 3, 2021, a Case Resolution Conference ("CRC") was held before a committee of the Board. As a resolution of this matter, the Respondent

agreed to enter this public Consent Order consisting of Findings of Fact, Conclusions of Law, and Order.

FINDINGS OF FACT

The Board makes the following Findings of Fact:

1. At all times relevant, the Respondent was and is licensed to practice clinical social work in the State of Maryland. The Respondent was originally licensed to practice social work on September 1, 1977, under License Number 01563. The Respondent's license to practice social work is current through October 31, 2022.¹

2. At all times relevant, the Respondent provided psychotherapy and counseling services to clients at a private practice² (the "Office")³ that he operated in Montgomery County, Maryland.

3. On or about October 7, 2019, the Board received a complaint (the "Complaint") from a licensed certified social worker (the "Complainant")⁴ regarding the Respondent's treatment of an adult female client (the "Client"). In general, the Complaint alleged, *inter alia*, that the Respondent, during the course of providing counseling to the Client: disclosed to the Client his personal sexual preferences; expressed his belief to the Client that he and she were lovers in a past life; inappropriately sent unsolicited pictures of

¹In addition, the Respondent has been licensed as a clinical marriage and family therapist by the Maryland State Board of Professional Counselors & Therapists since November 26, 2001 under License Number LCM170.

²See Health Occ. § 19-101(q)(1) (defining private practice as the "provision of psychotherapy by a licensed certified social worker-clinical who assumes responsibility and accountability for the nature and quality of the services provided to a client in exchange for direct payment").

³To ensure confidentiality, the names of any patients or health care facilities will not be identified in this document.

⁴The Complainant's licensure was issued by the State of Virginia.

himself to the Client; sent an inordinate amount of communication to the Client via electronic and telephonic media; gave gifts to the Client; and physically touched the Client without consent.

4. After reviewing the Complaint, the Board initiated an investigation which included interviews with the Client and the Respondent, reviewing treatment and billing records, and reviewing records of communication between the Respondent and the Client.

5. On or about October 22, 2018, the Respondent commenced providing psychotherapy services to the Client, a woman then in her forties, at his Office.

6. The Client had been previously diagnosed with post-traumatic stress disorder ("PTSD"), was struggling to cope with the suicide of her spouse and had experienced suicidal ideation herself.

7. The Respondent provided psychotherapy services to the Client for the next twelve (12) months during which he became aware of the Client's mental health challenges. The Respondent provided counseling sessions to the Client between two (2) and twelve (12) times each month.

8. Approximately two (2) months after therapy began, the Respondent documented in his psychotherapy session notes for December 5, 2018, that the Client had low self-esteem, felt inferior, and was depressed. He also noted that she was dependent and had been rejected by her family.

9. The Respondent acknowledged the Client's vulnerability, stating "in her life, in the time that we saw each other, I was her support, she had nobody else, really."

10. The Client alleged that:

- a. the Respondent told her that he and she had been married or were lovers in a past life;
- b. the Respondent had never cheated on his wife but had thought about what it would be like to be with another woman;
- c. the Respondent made sexual remarks to the Client regarding "copulation" that were unrelated to treatment;
- d. the Respondent stated that men do not care about a woman's weight because it is all about how she moves;
- e. during the course of treatment that the Respondent began to touch her;
- f. the Client objected to the Respondent's touchings and asked him to refrain from doing so;
- g. on or about September 5, 2019, nearly one year after commencing treatment, the Client sent the Respondent a text message that read, "I thought we discussed you not touching me . . . You continue to do so.";
- h. the Respondent increasingly contacted her during the course of providing treatment to establish a personal relationship;
- i. the Respondent and the Client began using FaceTime so that the Respondent could conduct psychotherapy sessions with the Client when the Client was in California or outside of the country so the Respondent could provide continued support;

- j. on or about August 16, 2019, during a therapy session over FaceTime conducted while the Client was in California, the Respondent inquired whether the Client wanted him to be her "boyfriend";
- k. the Respondent encouraged the Client to download WhatsApp, an Internet electronic medium, so that he could contact the Client;
- l. during the course of providing treatment to the Client, the Respondent sent the following inappropriate communications to the Client:
 - a) On or about April 4, 2019, the Respondent sent the Client a picture of himself in a tuxedo as he was preparing for his son's wedding.
 - b) On or about July 16, 2019, at approximately 9:46 p.m., the Respondent sent the Client a WhatsApp message that read, "Wow, new mattresses!! A fresh start there. Would love to watch u in a pillow fight!!!"
 - c) On or about July 25, 2019, the Respondent sent the Client a picture of a bedroom in his house that depicted an unoccupied bed draped with a comforter and two pillows, which was one of several pictures sent to the Client, who had asked him for ideas about remodeling the Client's house, as the Respondent had just remodeled his.
 - d) on or about July 28, 2019, the Respondent sent the Client a picture of his kayak.

e) on or about July 31, 2019, the Respondent sent the Client a WhatsApp message that contained an emoji of a face that was winking and blowing a heart-shaped kiss.

11. In his Board interview the Respondent denied each of the allegations in the complaint and the Client's specific claims of inappropriate conduct as specified *supra*. The Respondent admitted that he touched the Client's elbow on an occasion when guiding her out of the crowded waiting room to his office.

12. The Respondent claimed that on numerous occasions during the course of treatment, the Client expressed an interest in having sexual relations with him. The Respondent did not document these occurrences in the Client's treatment records.

13. The Respondent inappropriately gave gifts of value to the Client, including a bracelet ornament in the form of an elephant with a heart engraved on it and a teddy bear, which she accepted. The Client later brought the teddy bear back to the Respondent's Office and expressed her uneasiness with accepting the gift. The Respondent requested that she keep the teddy bear even though she had informed him that she wanted to return it to him.

14. The Respondent inappropriately accepted gifts of nominal value from the Client including: a box of chocolates; a mini-helmet from Italy; a paperweight; a balloon; and several books.

15. The Respondent suggested that the Client enroll her daughter in swim classes at a year-round youth swim program at which the Respondent's son had been previously employed as a swim coach. The Client complied with the Respondent's suggestion.

16. The Respondent sent text messages to the Client's minor daughter in response to her text in which she expressed gratitude for the Respondent's treating her mother.
17. The Respondent offered to make the bathroom in his Office available to the Client.
18. On or about September 17, 2019, the Client admitted herself into an inpatient psychiatric facility at a hospital (the "Hospital") upon experiencing worsening depression and active suicidal ideation. The attending physician concluded that the Client's PTSD symptoms were "likely made worse by her current therapeutic relationship" with the Respondent. The attending physician characterized the relationship that the Respondent cultivated as "manipulative in nature and . . . not . . . helpful treatment."
19. On or about September 24, 2019, the Client notified the Respondent that she wished to discontinue treatment and requested a copy of her treatment records.
20. On the same day, the Respondent replied that the Client's reaction was "extreme." On or about September 27, 2019, the Respondent sent the Client a WhatsApp message in which he stated that he was "disappointed" and that he wished to meet and talk with her in accordance with the documents signed by the Client when commencing treatment with the Respondent.
21. On or about October 1, 2019, the Client received a card from the Respondent expressing his interest in continued therapy. Though it was not stated on the card, the Respondent claimed that the card was sent to the Client with the intention of transitioning the Client to another provider.

22. The Respondent's billing records state that he charged the Client approximately twenty-five thousand four hundred sixty-nine dollars (\$25,469.00) for providing clinical social work services from October 22, 2018 to September 24, 2019.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Board concludes as a matter of law that the Respondent actions, as described above, constitute violation of the following provisions of the Act and COMAR: commits any act of gross negligence, incompetence, or misconduct in the practice of social work, in violation of Health Occ. § 19-311(4); engages in a course of conduct inconsistent with generally accepted professional standards in the practice of social work, in violation of Health Occ. § 19-311(5); and violates any provision of this title or regulations governing the practice of social work adopted and published by the Board, *i.e.* COMAR 10.42.03.03B(3), COMAR 10.42.03.05A and D, COMAR 10.42.03.06A(3) and (7), and COMAR 10.42.03.06B(1)(a) and (b), in violation of Health Occ. § 19-311(6).

ORDER

It is, on the affirmative vote of a majority of the Board, hereby:

ORDERED that the Respondent's license to practice social work in the State of Maryland be and hereby is **SUSPENDED** for a minimum period of **THREE (3) YEARS** to commence sixty (60) days from the date the Board executes this Consent Order in order to properly transition his clients and continuing until such time as he has complied with the following terms and conditions:

1. Mental Health Care Providers

- a. The Respondent shall continue therapy with his current mental health care provider (the "Mental Health Care Provider").
 - b. The Respondent shall provide the Mental Health Care Provider with a copy of the Consent Order.
 - c. The Respondent shall sign releases of information so that the Board can make disclosure to the Mental Health Care Provider, and the Mental Health Care Provider can make disclosures to the Board.
 - d. The Respondent shall notify the Board if he changes his Mental Health Care Provider.
 - e. The Mental Health Care Provider shall submit quarterly reports to the Board summarizing the Respondent's treatment sessions. The Respondent shall make all reasonable effort to ensure that his Mental Health Care Providers submit the required quarterly reports to the Board in a timely manner.
 - f. The Respondent's failure to comply with the recommendations or requirements of his Mental Health Care Providers shall be deemed a violation of this Consent Order.
 - g. The Respondent may discontinue with mental health therapy if his Mental Health Provider determines that he no longer needs mental health therapy, and the Board approves the discontinuation.
2. During the suspension, the Respondent shall successfully complete the following Board-approved courses: 1) borderline patients; 2) personality disorder; 3) documentation; and 4) suicidality. The Respondent shall be responsible for submitting written documentation to the Board of her successful completion of these courses. The Respondent understands and agrees that he may not use this coursework to fulfill any requirements mandated for licensure renewal. The Respondent shall be solely responsible for furnishing the Board with adequate written verification that he has completed the courses according to the terms set forth herein.
 3. Petition to Stay the Suspension:

- a. One (1) month prior to the Respondent having served **two (2) years** of active suspension of his license, the Respondent, if he has fully complied with the terms and conditions of his suspension, may file a petition with the Board requesting that the remainder of his suspension period be stayed. The Board, in its discretion, may stay the remainder of the Respondent's license suspension.

4. Petition to Terminate the Suspension:

- a. Unless otherwise ordered by the Board, if the Respondent has successfully complied with the above terms and conditions, and after the conclusion of the entire **three (3) years of suspension** of his license, the Respondent may file a petition with the Board requesting a termination of the suspension of his license. The Board, in its discretion, may terminate the suspension of the Respondent's license if he has fully complied with the terms and conditions of his suspension.

AND IT IS FURTHER ORDERED that in the event that the Board stays any portion of the Respondent's license suspension or terminates the Respondent's license suspension, the Respondent shall be placed on **PROBATION** for a minimum period of **TWO (2) YEARS**, which shall commence on the date the Board terminates the suspension of the Respondent's license and shall continue until all of the following terms and conditions are met:

1. The Respondent shall be subject to supervision by a Board-approved supervisor as follows:
 - a. With 30 calendar days of the being placed on probation, the Respondent shall provide the Board with the name, pertinent professional background information of the supervisor whom the Respondent is offering for approval, and written notice to the Board from the supervisor confirming his or her acceptance of the supervisory role of the Respondent and that there is no personal or professional relationship with the supervisor.

- b. The Respondent's proposed supervisor, to the best of the Respondent's knowledge, should not be an individual who is currently under investigation, and has not been disciplined by the Board within the past five years.
- c. If the Respondent fails to provide a proposed supervisor's name within 30 days from being placed on probation, the Respondent's license shall be automatically suspended from the 31st day until the Respondent provides the name and background of a supervisor.
- d. The Board, in its discretion, may accept the proposed supervisor or request that the Respondent submit the name and professional background, and written notice confirmation from a different supervisor.
- e. The supervision begins after the Board approves the proposed supervisor.
- f. The Board will provide the supervisor with a copy of this Consent Order and any other documents the Board deems relevant.
- g. The Respondent shall grant the supervisor access to patient records selected by the supervisor, which shall, to the extent practicable, focus on the types of treatment at issue in the Respondent's charges.
- h. If the supervisor for any reason ceases to provide supervision, the Respondent shall immediately notify the Board and shall not practice social work beyond the 30th day after the supervisor has ceased to provide supervision and until the Respondent has submitted the name and professional background, and written notice of confirmation, from a proposed replacement supervisor to the Board.
- i. It shall be the Respondent's responsibility to ensure that the supervisor:
 - i. Reviews the records of ten (10) patients each month, such client records to be chosen by the supervisor and not the Respondent.

- ii. Meet in-person with the Respondent at least once each month and discuss in-person with the Respondent the care the Respondent has provided for these specific clients.
 - iii. Be available to the Respondent for consultation on any client.
 - iv. Maintains the confidentiality of all treatment records and client information.
 - v. Provides the Board with quarterly reports which detail the quality of the Respondent's practice, any deficiencies, concerns, or needed improvements, as well as any measures that have been taken to improve client treatment.
 - vi. Immediately reports to the Board any indication that the Respondent may pose a substantial risk to clients.
 - j. If the Board, upon consideration of the supervisory reports and the Respondent's response, if any, has a reasonable basis to believe that the Respondent is not meeting the standards of care or failing to keep adequate client records in his or her practice, the Board may find a violation of probation after a hearing.
2. The Respondent shall comply with the Maryland Social Workers Act and all laws, statutes and regulations pertaining thereof.

AND IT IS FURTHER ORDERED that after the conclusion of the entire **TWO (2) YEAR** period of probation, the Respondent may submit a written petition to the Board requesting termination of probation. After consideration of the petition, the probation may be terminated through an order of the Board. The Respondent may be required to appear before the Board or a committee of the Board to discuss her petition for termination. The Board will grant the petition to terminate the probation if the Respondent has complied

with all of the probationary terms and conditions and there are no pending complaints involving similar violations found in this case before the Board; and it is further


ORDERED that if the Board determines, after notice and an opportunity for an evidentiary hearing if there is a genuine dispute as to a material fact or a show cause hearing before the Board if there is no genuine dispute as to a material fact, that the Respondent has failed to comply with any terms or condition of probation or this Consent Order, the Board may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, impose a civil monetary fine upon the Respondent, or suspend or revoke the Respondent's license to practice social work in Maryland; and it is further

ORDERED that the Respondent shall not serve or continue to serve as: a Board authorized sponsor, presenter and/or trainer of social work continuing education learning activities, an ethics tutor, an evaluator for the Board, or a Board-approved supervisor for a period of five (5) years from the effective date of this Consent Order; and it is further

ORDERED that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further

ORDERED that this Consent Order is a **PUBLIC DOCUMENT** pursuant to Md. Code Ann., Gen. Provisions §§ 4-101 *et seq.* (2014).

9/21/2021
Date



Karen Richards, LCSW-C
Board Chair
Maryland State Board of
Social Work Examiners

CONSENT

I, Marc I. Hafkin, LCSW-C, acknowledge that I am represented by counsel and have consulted with counsel before entering into this Consent Order. By this Consent and for the purpose of resolving the issues raised by the Board, I agree and accept to be bound by the foregoing Consent Order and its conditions.

I acknowledge the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in 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 the law. I agree to forego my opportunity to challenge these allegations. I acknowledge the legal authority and jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I affirm that I am waiving my right to appeal any adverse ruling of the Board that might have followed after any such hearing.

I sign this Consent Order after having an opportunity to consult with counsel, voluntarily and without reservation, and I fully understand and comprehend the language, meaning and terms of this Consent Order.

8/19/20
Date

Marc I. Hafkin
Marc I. Hafkin, LCSW-C
Respondent

NOTARY

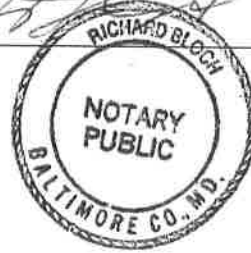
STATE OF MARYLAND
CITY/COUNTY OF Baltimore

I HEREBY CERTIFY that on this 19th day of August
 , 2021, before me, a Notary Public of the foregoing State and City/County
personally appear Marc I. Hafkin, LCSW-C, and made oath in due form of law that signing
the foregoing Consent Order was his voluntary act and deed.

AS WITNESSETH my hand and notary seal.



Notary Public



My commission expires: 10/14/23