

**IN THE MATTER OF** \* **BEFORE THE MARYLAND**  
**KRISTIN PHOENIX, LMSW** \* **BOARD OF SOCIAL WORK**  
**Respondent** \* **EXAMINERS**  
**License No.: 14360** \*  
\* **CASE NO.: 2018-2443**

\* \* \* \* \*

**CONSENT ORDER**

On March 8, 2019, the Maryland Board of Social Work Examiners (the “Board”) issued charges to Kristin Phoenix, LMSW (the “Respondent”), license number 14360, pursuant to the Maryland Social Workers Act (the “Act”) codified at Md. Code Ann., Health Occ. §§ 19-101 *et seq.* (2014 Repl. Vol. and 2018 Supp.).

The pertinent provisions of the Act provide the following:

**§ 19-311. Grounds for license denials, discipline.**

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:

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

The pertinent provisions of COMAR provide the following:

**10.42.03.03 Responsibilities to Clients**

B. The Licensee may not: ...

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

On May 13, 2019, the parties appeared at a Case Resolution Conference (“CRC”) before a committee of the Board. The Respondent, represented by counsel, and the Administrative Prosecutor participated in the CRC. As a result, the parties agreed to the following Consent Order consisting of Findings of Fact, Conclusions of Law, and Order.

**FINDINGS OF FACT**

The Board finds that:

1. At all times relevant hereto, the Respondent was licensed to practice social work in the State of Maryland.
2. The Respondent was originally licensed to practice social work in the State of Maryland on August 6, 2008, under license number 14360.
3. The Respondent’s current license expires on October 31, 2019.
4. At all times relevant to the Charges, the Respondent was employed for an agency that provides in-home counseling services for an outpatient mental health center (Agency A).
5. During her employment with Agency A, the Respondent received supervision for attaining LCSW-C licensure.

## **The complaint**

6. On January 23, 2018, the Board received a complaint that the Respondent was seen by the Montgomery County Crisis Team (MCCT) in response to a request made by the Gaithersburg City Police Department (GCPD) following an incident at the Respondent's former residence with her ex-husband.

7. A member of the MCCT had evaluated the Respondent and found her to be manic with severely impaired judgment and initiated an emergency petition for involuntary admission to a local hospital.

8. The complaint includes the following statements:

On 1/20/18 Gaithersburg City police requested the MC44 (mobile crisis team) to respond to the client's husband's home [address redacted here for privacy] because [the Respondent] was at the house taking the furniture out of the home. This writer evaluated the [Respondent] for mental health concerns and found her to be manic with severely impaired judgment. The [Respondent] is a therapist with [Agency A] and upon arrival we learned that the [Respondent] had picked up one of her 15 year old female clients [name redacted here for privacy] and [had] taken her to buy an iPhone and an Apple watch with full cell service for the client so that the client could be employed by [the Respondent] as a dog walker. The [Respondent] believes that she has established a company that provides dog walking services so that she can employ this 15 year old client. [The Respondent] then brought the 15 year old to her husband's home and had the client assisting her to remove the furniture from the home. This writer is concerned that the [Respondent's] mental health has severely impacted the [Respondent's] ability to practice social work and presents a danger to her clients.

## **The Board's investigation**

9. Upon receipt of the complaint, the Board initiated an investigation wherein it obtained the police report from the GCPD, among other documents.

10. The police report described the Respondent's behavior on January 20, 2018 as follows:

... [The Respondent] was speaking rapidly and her thoughts, her eyes were wide open and her thoughts were extremely disjointed, meaning that she jumped from one topic to the next. Sometimes, her speech and words did not make any logical sense and [the officer] struggled to understand what [the Respondent] was trying to convey. At one point in the conversation, [the Respondent] advised that she was diagnosed with bipolar disorder, but didn't believe in the diagnosis and planned to see another psychiatrist. She stated that she was not taking her medication as prescribed and admitted that she had not slept in seven days....[the Respondent] stated that she wanted her children and dogs to come with her and that she was moving out.... She advised that she had a protection order against her husband, but further questioning revealed that she had filled out a petition but not actually brought it to the Commissioner's office. [The Respondent] was also slightly delusional, as she believed that this petition could be enforced even though it was not valid. She first stated she was taking the children but then changed her mind and said she was taking the dogs. Minutes later, she advised she was only at the address in order to open a credit card.

...[The Respondent] thought it was appropriate to bring her 15-year-old patient with her in order to help move out of her residence and confront her husband....Based on [the Respondent's] erratic behavior, rapid speech, delusional and disjointed thought patterns and self-admissions to not taking her medication or sleeping for an entire week, officers contacted MC-44, the Mobile Crisis Team.

MC-44 responded to the scene and determined that [the Respondent] needed to be emergency petitioned due to her severely impaired judgment (taking a 15-year-old patient with her in order to help during this incident), her delusional thoughts and manic behavior. [The officer] transported [the Respondent] to [a local hospital] where she was released into the custody of hospital staff based on the strength of an EEP written by [Montgomery County Crisis Center].

11. The Board interviewed the Respondent regarding these events, and she stated she does not subscribe to the diagnosis of bipolar I disorder nor does she agree with the assessment by the MCCT.

12. The Respondent asserted that she had tried to purchase the phones and watches for her children and that she was “not sure where the dog walking came up.”

13. She further stated that she was on a medication at the time which made her “loopy and not coherent.”

14. The Respondent admitted to an error in judgment in bringing one of her patients along to remove furniture from the marital home.

15. The Respondent stated that she had not been taking the two prescribed bipolar medications since she moved out of the marital home and has been stable.

16. The Respondent also provided the Board with a letter from a psychiatrist dated March 27, 2018 which stated that she “has been quite stable for several months despite multiple stressors” and “is now on a good medication regime.”

### **The Board’s Expert’s Analysis**

17. Based upon the Board’s investigation, the Board directed the Respondent to undergo a mental health evaluation by a licensed psychologist and expert (“the Board’s expert”).

18. The Board’s expert met with the Respondent on May 31, 2018 and July 12, 2018 and administered numerous psychological tests. The Board’s expert also reviewed the Board’s file.

19. The Board's expert then prepared an extensive report which outlines the nature and extent of the Respondent's mental health condition and ability to practice social work.

20. Based on this evaluation, the Board's expert opined that "the number of problem areas identified on [one of the tests administered] are in a range that have [the] potential to interfere with [the Respondent's] ability to practice clinical social work without psychotherapy intervention and close professional practice supervision for a specified amount of time."

21. The Board's expert also opined that the Respondent seemed to be "faking good" on some of the scales administered and remarked that "[t]he extent of the positive impression management is a significant concern because the denial that is present can lead to [the Respondent's] failing to get the psychotherapy intervention and support she needs and the professional practice supervision she also very much needs."

22. Despite having been diagnosed with a mental health disorder on two prior occasions, the Respondent denied the diagnosis during her evaluation with the Board's expert.

23. Further, the Board's expert noted that although the Respondent was in supervision for attaining LCSW-C licensure while employed with Agency A, at the time of the evaluation, it appeared the Respondent was not being supervised despite her part-time employment providing therapy to special needs children as part of her employment with another firm, Agency B.

24. The Board's expert also noted that documents reviewed and interview data show the possibility of substance dependence in connection with the Respondent's

prescription medication use. The Respondent was vague about her brief stay at a substance abuse treatment center.

25. It is the Board expert's opinion that the Respondent may not be receiving consistent treatment for her mental health diagnosis and that she has some denial about the diagnosis.

26. In sum, the Board expert opined that the Respondent has possible relapse risk associated with her social work professional life as the result of her mental health diagnosis.

27. The Respondent's conduct of bringing a patient along to move furniture from her former residence represents an ethical violation and misconduct in the practice of social work. COMAR 10.42.03.03(B)(3). Health Occ. § 19-311(3), (5) and (6).

28. Based upon the Respondent's mental health diagnosis and her denial of the same, she is mentally or physically incompetent to practice social work. Health Occ. § 19-311(3).

### CONCLUSIONS OF LAW

Based upon the foregoing Findings of Fact, the Board concludes as a matter of law that the Respondent's conduct constitutes grounds for discipline under Health Occ. § 19-311(3), (4), (5), and (6) as well as COMAR 10.42.03.03(B)(3).

### ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, it is this 9th day of August 2019, by a majority of a quorum of the Board considering this case hereby:

**ORDERED** that Ms. Phoenix's license shall be **SUSPENDED for a period of AT LEAST ONE YEAR**; and it is further

**ORDERED** that during the period of the suspension Ms. Phoenix shall:

1. Engage in a regular course of therapy with a Board-approved therapist at intervals to be determined by the therapist;
2. Maintain her prescribed medication regimen under the care of a Board-approved psychiatrist;
3. Successfully complete a Board-approved ethics course to address dual relationships and patient-therapist boundaries; and
4. Submit to a Board-approved evaluation for fitness to practice, which shall be provided to the Board upon completion; and it is further

**ORDERED** that after the minimum period of one (1) year, and if Ms. Phoenix has fully and satisfactorily complied with all terms and conditions for the suspension, Ms. Phoenix may submit a written petition to the Board for termination of the suspension. After determination that she has complied with the Consent Order, including a report from an independent evaluator stating that she is fit to practice, and if there are no complaints of a similar nature, the Board may administratively terminate the suspension through an order of the Board; and it is further

**ORDERED** that upon termination of the suspension, Ms. Phoenix's license shall be placed on **PROBATION for a period of at least TWO YEARS**; and it is further

**ORDERED** that during the period of probation, Ms. Phoenix shall:



1. Maintain her regular course of therapy and prescribed medication regimen under the care of a Board-approved psychiatrist as set forth herein;
2. Meet at least once a month with a Board-approved supervisor for random chart review and discussion. At these meetings, the supervisor shall choose a random sample of at least ten (10) of Ms. Phoenix's active cases to review. If Ms. Phoenix's active cases includes less than ten (10) cases, then the supervisor shall review all of Ms. Phoenix's active cases. The supervisor shall review the charts to determine Ms. Phoenix's compliance with quality of care, ethical standards and record keeping standards. In addition, the supervisor shall discuss the cases with Ms. Phoenix to evaluate Ms. Phoenix's understanding of the conditions she is treating and her compliance with standards of care, ethical standards and record keeping standards;
3. Ms. Phoenix shall authorize the Board to provide the supervisor with the entire investigative file, including all investigative interviews and reports obtained during the investigation, the Board's disciplinary charges of March 8, 2019, and the Consent Order;
4. The supervisor shall submit quarterly written reports to the Board, which shall include but not be limited to the number and type of cases reviewed, issues discussed and his/her assessment of Ms. Phoenix's understanding of the conditions she is treating and her compliance with standards of care, ethical standards and record keeping standards;

5. Ensure that the supervisor submits the required quarterly reports to the Board in a timely manner;
6. The Board has sole authority to implement any changes in the supervision and retains all authority to approve any changes in the supervision;
7. In the event that the supervisor discontinues supervising Ms. Phoenix for any reason, Ms. Phoenix shall immediately notify the Board and submit a replacement candidate to serve as her supervisor under the terms specified above; and
8. The Respondent shall comply with the Maryland Social Workers Act and all laws, statutes and regulations pertaining thereof; and it is further

**ORDERED** that no part of the training or education that Ms. Phoenix receives in order to comply with the Consent Order may be applied to her continuing education credits required for licensure; and it is further

**ORDERED** that at the conclusion of the two year probationary period, Ms. Phoenix may petition the Board for a termination of her probation. The Board may terminate Ms. Phoenix's probation depending on whether she has fulfilled all of the terms and conditions of the Consent Order, and whether there are any pending complaints against her; and it is further

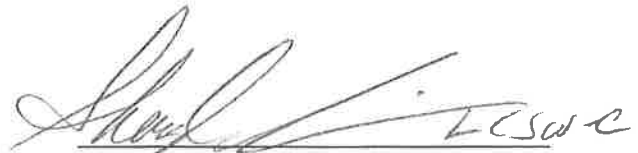
**ORDERED** that if Ms. Phoenix violates any of the terms and conditions of the Consent Order, the Board, in its discretion, after notice and an opportunity for an evidentiary hearing, may impose any sanction that the Board may have imposed in this

case, including additional probationary terms and conditions, a reprimand, suspension, revocation and/or a monetary penalty; and it is further

**ORDERED** that Ms. Phoenix shall be responsible for all costs associated with compliance of the Consent Order.; and it is further

**ORDERED** that this Consent Order is a **PUBLIC DOCUMENT** pursuant to Md. Code Ann., Gen. Prov. § 4-101 *et seq.* (2014; 2018 Supp.).

8/9/19  
Date

  
Sherryl Silberman, LCSW-C  
Board Chair

**CONSENT**

I, Kristin Phoenix, 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 request an evidentiary hearing on the Charges, and I am waiving my right to appeal any adverse ruling of the Board that might have followed after any such hearing(s).

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

07/03/19  
Date

Kristin Phoenix  
Kristin Phoenix, LMSW

**NOTARY**

STATE OF Maryland

COUNTY/CITY OF Montgomery :

I hereby certify that on this 3<sup>rd</sup> day of July, 2019, before me, a Notary Public of the State and County/City aforesaid, personally appeared Kristin Phoenix and made an oath in due form that the foregoing Consent Order was her voluntary act and deed.

**AS WITNESS, my hand and Notary Seal.**



Notary Public

My commission expires

