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BEFORE THE ARIZONA BOARD

OF BEHAVIORAL HEALTH EXAMINERS

In the Matter of:

Taleigha M. Thompson, LMSW-7616T, Licensed Master Social Worker, In the State of Arizona.

RESPONDENT

CASE NOS. 2023-0174 2023-0176 2023-0186

CONSENT AGREEMENT

In the interest of a prompt and speedy settlement of the above captioned matter, consistent with the public interest, statutory requirements and responsibilities of the Arizona State Board of Behavioral Health Examiners ("Board"), and pursuant to A.R.S. §§ 32-3281(F) and 41-1092.07(F)(5), Taleigha M. Thompson ("Respondent") and the Board enter into this Consent Agreement, Findings of Fact, Conclusions of Law and Order ("Consent Agreement") as a final disposition of this matter.

RECITALS

Respondent understands and agrees that:

- Any record prepared in this matter, all investigative materials prepared or received by the Board concerning the allegations, and all related materials and exhibits may be retained in the Board's file pertaining to this matter.
- 2. Respondent has the right to a formal administrative hearing at which Respondent can present evidence and cross examine the State's witnesses. Respondent hereby irrevocably waives their right to such formal hearing concerning these allegations and irrevocably waives their right to any rehearing or judicial review relating to the allegations contained in this Consent Agreement.
- Respondent has the right to consult with an attorney prior to entering into this Consent Agreement.

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- 4. Respondent acknowledges and agrees that upon signing this Consent Agreement and returning it to the Board's Executive Director, Respondent may not revoke their acceptance of this Consent Agreement or make any modifications to it. Any modification of this original document is ineffective and void unless mutually approved by the parties in writing.
- 5. The findings contained in the Findings of Fact portion of this Consent Agreement are conclusive evidence of the facts stated herein between only Respondent and the Board for the final disposition of this matter and may be used for purposes of determining sanctions in any future disciplinary matter.
- 6. This Consent Agreement is subject to the Board's approval, and will be effective only when the Board accepts it. In the event the Board in its discretion does not approve this Consent Agreement, this Consent Agreement is withdrawn and shall be of no evidentiary value, nor shall it be relied upon or introduced in any disciplinary action by any party hereto, except that Respondent agrees that should the Board reject this Consent Agreement and this case proceeds to hearing, Respondent shall assert no claim that the Board was prejudiced by its review and discussion of this document or of any records relating thereto.
- 7. Respondent acknowledges and agrees that the acceptance of this Consent Agreement is solely to settle this Board matter and does not preclude the Board from instituting other proceedings as may be appropriate now or in the future. Furthermore, and notwithstanding any language in this Consent Agreement, this Consent Agreement does not preclude in any way any other state agency or officer or political subdivision of this state from instituting proceedings, investigating claims, or taking legal action as may be appropriate now or in the future relating to this matter or other matters concerning Respondent, including but not limited to violations of Arizona's Consumer Fraud Act. Respondent acknowledges that, other than with respect to the Board, this Consent Agreement makes no representations, implied or

otherwise, about the views or intended actions of any other state agency or officer or political subdivision of the state relating to this matter or other matters concerning Respondent.

- 8. Respondent understands that once the Board approves and signs this Consent Agreement, it is a public record that may be publicly disseminated as a formal action of the Board, and that it shall be reported as required by law to the National Practitioner Data Bank.
- 9. Respondent further understands that any violation of this Consent Agreement constitutes unprofessional conduct pursuant to A.R.S. § 32-3251(16)(n) and may result in disciplinary action pursuant to A.R.S. § 32-3281.
- 10. The Board therefore retains jurisdiction over Respondent and may initiate disciplinary action against Respondent if it determines that they have failed to comply with the terms of this Consent Agreement or of the practice act.

The Board issues the following Findings of Fact, Conclusions of Law and Order:

FINDINGS OF FACT

- Respondent is the holder of License No. LMSW-7616T for the practice of social work in the State of Arizona.
- 2. In 03/23 and 04/23, the Board received complaints against Respondent alleging she had a private practice that was not under supervision.
 - 3. Private Practice's website indicated the following:
 - Respondent is an LMSW, Director of Operations, and therapist at Private Practice.
 - b. Respondent has over ten years of experience in the behavioral health field.
 - c. Therapy is for anyone who is open and willing to acknowledge their struggles.
 - d. Respondent has experience with adolescents, young adults, and middle-aged adults.

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- e. Respondent has a holistic approach since Respondent not only treats the mind, but the body and spirit as well.
- f. Respondent uses CBT, psychotherapy, mindfulness, trauma informed therapy, person centered planning and therapy, and family strategies therapy.
- g. A statement that Private Practice accepts insurance plans.
- h. By 2025, Private Practice will be serving California, Illinois, and New York and plans to develop community centers that help and enrich daily lives of the community, doula services, and mental health safe spaces such as coffee shops and gyms with personal certified trainers on site.
- 4. From 09/22 03/23, Private Practice's social media posts included the following in part:
 - a. A 09/18/22 post included a link to Private Practice's website for counseling services.
 - A 10/02/22 post indicated Private Practice was there for mental health needs and was accepting new intakes.
 - c. A 10/22/22 post indicated someone had won a free year of counseling services with Private Practice and Private Practice is proud to serve the community and Phoenix area.
 - d. An 11/11/22 post indicated Private Practice provides individual and family counseling and specializes in US Military counseling.
 - e. A 02/25/23 post indicated there was openings for therapy and life coaching.
 - f. A 03/09/23 post indicated Partner was a licensed therapist and had openings for therapy and life coaching.

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	5.	Despite all of these advertisements clearly making it seems like Private Practice
was	a fully ac	tive and operating psychotherapy practice, Respondent represents that neither he
nor	Partner ev	ver provided any psychotherapy services through Private Practice.

- 6. Respondent represents the only services ever provided through Private Practice were coaching services.
- Respondent represents that coaching was never meant to be a service that 7. Private Practice would offer.
- Respondent continued to advertise through Private Practice because she was 8. working for Agency where she could provide therapy services, so she felt she was accurately advertising herself since she was legally able to provide various therapy services at Agency under supervision.
- 9. Respondent represented the following regarding the various advertisements for different services Private Practice would offer:
 - a. Respondent would make clients aware that Private Practice was not operating and that services were being provided through Agency.
 - b. The out of state services was more of a dream for the future but Respondent knew you would need to be licensed in that state.
 - c. Respondent wanted to become certified in doula services one day but acknowledged she was not currently certified.
 - d. Respondent wanted people to see the type of therapist she was through these advertisements.
 - e. Respondent was simply trying to get things in line for when they could open Private Practice.

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f. Despite Respondent believing her skills were accurately represented, she can see how this appears misleading by advertising through Private Practice's website and platforms when it was not in fact offering all of these services.

- 10. Respondent's advertisements are deceptive and misleading for the following reasons:
 - a. Respondent represents she was never offering psychotherapy services through Private Practice, yet all of the advertisements for several months indicate Private Practice was an active psychotherapy practice offering intakes and counseling services.
 - b. Private Practice was not offering doula services and it was a vision for the future.
 - c. Culture University was being advertised as an active entity, but Respondent represents nothing ever transpired with Culture University.
 - d. Private Practice's website indicated Respondent accepted insurance when in fact she was not able to accept insurance being an associate level licensee.
 - Respondent advertised free counseling for a year but Respondent represents
 Private Practice never provided counseling services.
 - f. Respondent in turn offered coaching services to a client but coaching was never advertised as a service offered by Private Practice through the website.
- 11. Respondent failed to consult with a supervisor she was working under prior to developing the website and all of these advertisements.
- 12. From 11/22 02/23, Respondent was employed as a therapist at Agency where she provided direct behavioral health services to clients.
 - 13. Specifically, Respondent treated client AD at Agency from 12/07/22 02/23/23.

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- 14. On 04/03/23, Respondent provided a coaching session to AD at Private Practice.
- 15. Nowhere within AD's clinical records at Agency was coaching listed as a recommendation for continuity of care.
- 16. At the onset of the coaching services, Respondent also failed to document her prior therapeutic relationship with AD, the rationale for transitioning them to coaching, and how there was no conflict of interest.
- 17. Despite Respondent documenting at the onset of coaching services that the services would be non-clinical and non-diagnostic, the focus of the therapy at Agency and Private Practice were the exact same.
- 18. Respondent felt it was appropriate to take a therapy client, transition them to coaching services and not provide psychotherapy modalities, and consider this not therapeutic when in fact the focus of services was the same the entire time.
- 19. It appears Respondent was using coaching as a way to circumvent the system to provide therapy services under the guise of a life coach since life coaching is a service not regulated by Board rules or laws.
- 20. Respondent also represented that the intention was to offer coaching temporarily so that she could ensure there was some sort of continuity of care in place.
- 21. Respondent in fact engaged in multiple roles with AD by acting as their therapist, then life coach, without clear boundaries and rationales being documented.
- 22. In addition to these concerns, Respondent also anticipated one day offering various services to clients once she began operating Private Practice such as doula services and other community-based services through Culture University, showing Respondent's
- 23. Respondent further acknowledged that AD actually needed therapy rather than coaching services.

- 24. Respondent's consents for coaching discussed confidentiality when coaching services do not have any laws around confidentiality, and she lists her licensure within the consents when coaching does not require licensure.
- 25. Respondent represents she does not have any formal training in coaching services and simply did her own research on coaching before beginning coaching services with AD.
- 26. Upon review of Private Practice's website and social medias, Respondent was clearly advertising as if Private Practice was an active and operating psychotherapy practice based on the numerous postings and advertisements beginning as early as 09/18/22 indicating Private Practice was offering intakes for counseling services.
- 27. Respondent was not aware of the Board's Supervised Private Practice program which requires pre-approval from the Board if an associate level licensee wants to open their own private practice.
- 28. Respondent was under the impression she just needed a clinical supervisor, showing Respondent's lack of knowledge of Board rules.
- 29. Immediately after graduating and obtaining temporary licensure, Respondent begins to market herself without fully understanding Board rules and regulations.

CONCLUSIONS OF LAW

- The Board has jurisdiction over Respondent pursuant to A.R.S. § 32-3251 et seq.
 and the rules promulgated by the Board relating to Respondent's professional practice as a
 licensed behavioral health professional.
- 2. The conduct and circumstances described in the Findings of Fact constitute a violation of A.R.S. § 32-3251(16)(k), engaging in any conduct or practice that is contrary to recognized standards of ethics in the behavioral health profession or that constitutes a danger to the health, welfare or safety of a client, as it relates to the NASW Code of Ethics:

1.06(c) Conflict of Interest

Social workers should not engage in dual or multiple relationships with clients or former clients in which there is a risk of exploitation or potential harm to the client. In instances when dual or multiple relationships are unavoidable, social workers should take steps to protect clients and are responsible for setting clear, appropriate, and culturally sensitive boundaries. (Dual or multiple relationships occur when social workers relate to clients in more than one relationship, whether professional, social, or business. Dual or multiple relationships can occur simultaneously or consecutively.)

- 3. The conduct and circumstances described in the Findings of Fact constitute a violation of A.R.S. § 32-3251(16)(d), making any false, fraudulent or deceptive statement connected with the practice of behavioral health, including false or misleading advertising by the licensee or the licensee's staff or a representative compensated by the licensee.
- 4. The conduct and circumstances described in the Findings of Fact constitute a violation of A.R.S. § 32-3251(16)(ii), violating any federal or state law, rule or regulation applicable to the practice of behavioral health as it relates to the following:

A.R.S. § 32-3286. Unlawful practice; unlawful use of title; violation; classification; civil penalty; exception

ORDER

Based upon the foregoing Findings of Fact and Conclusions of Law, the parties agree to the provisions and penalties imposed as follows:

Stayed Suspension

As of the effective date of this Consent Agreement, Respondent's license,
 LMSW-7568T, shall be SUSPENDED for 24 months. However, the suspension shall be stayed
 and Respondent's license shall be placed on probation.

- During the stayed suspension portion of the Order, if Respondent is noncompliant with the terms of the Order in any way, the stay of the suspension shall be lifted and Respondent's license shall be automatically suspended as set forth above.
- 3. If Respondent contests the lifting of the stay as it relates to this paragraph, Respondent shall request in writing, within 10 days of being notified of the automatic suspension of licensure, that the matter be placed on the Board agenda for the Board to review and determine if the automatic suspension of Respondent's license was supported by clear and convincing evidence.
- 4. If the written request is received within 10 days of a regularly scheduled Board meeting, the request will not be heard at that meeting, but will be heard at the next regularly scheduled Board meeting.
- 5. Pending the Board's review, Respondent's license shall be reported as suspended under review. Respondent may not work in any capacity as a licensed behavioral health professional pending the Board's review. The Board's decision and Order shall not be subject to further review.
- Respondent's license, LMSW-7568T, will be placed on probation for 24 months,
 effective from the date of entry as signed below.
- 7. Respondent shall not practice under their license, LMSW-7568T, unless they are fully compliant with all terms and conditions in this Consent Agreement. If, for any reason, Respondent is unable to comply with the terms and conditions of this Consent Agreement, they shall immediately notify the Board in writing and shall not practice under their license until they submit a written request to the Board to re-commence compliance with this Consent Agreement. All such requests shall be pre-approved by the Board Chair or designee.

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8. In the event that Respondent is unable to comply with the terms and conditions of this Consent Agreement, all remaining time frames shall be tolled and remain tolled until such time as they are granted approval to re-commence compliance with the Consent Agreement.

Practice Restriction

9. While on probation, if Respondent engages in the practice of behavioral health, they shall not participate in supervised private practice.

Continuing Education

- 10. In addition to the continuing education requirements of A.R.S. § 32-3273, within 12 months of the effective date of this Consent Agreement, Respondent shall complete 3 clock hours of the Arizona Statutes/Regulations Tutorial. All required continuing education shall be pre-approved by the Board Chair or designee. Upon completion, Respondent shall submit a certificate of completion of the required continuing education.
- 11. In addition to the continuing education requirements of A.R.S. § 32-3273, within 12 months of the effective date of this Consent Agreement, Respondent shall take and pass a three-semester credit hour graduate level behavioral health ethics course from a regionally accredited college or university, pre-approved by the Board Chair or designee. Upon completion, Respondent shall submit to the Board an official transcript establishing completion of the required course.

Clinical Supervision

12. While on probation, Respondent shall submit to clinical supervision for 24 months by a masters or higher level behavioral health professional licensed by the Arizona Board of Behavioral Health Examiners at the independent level. Within 30 days of the date of this Consent Agreement, Respondent shall submit the name of a clinical supervisor for pre-approval

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by the Board Chair or designee. Also within 30 days of the date of this Consent Agreement, the clinical supervisor shall submit a letter disclosing their prior relationship to Respondent. In that letter, the clinical supervisor must address why they should be approved, acknowledge that they have reviewed the Consent Agreement and include the results of an initial assessment and a supervision plan regarding the proposed supervision of Respondent. The letter from the supervisor shall be submitted to the Board.

Focus and Frequency of Clinical Supervision

13. The focus of the supervision shall relate to boundaries, Arizona documentation, conflict of interest, professionalism, marketing, termination of services and Arizona statutes and rules. Respondent shall meet individually with the supervisor for a minimum of one hour weekly.

Reports

- 14. Once approved, the supervisor shall submit quarterly reports for review and approval by the Board Chair or designee. The quarterly reports shall include issues presented in this Consent Agreement that need to be reported and the supervisor shall notify the Board if more frequent supervision is needed. Quarterly reports shall include the following:
 - a. Dates of each clinical supervision session.
 - A comprehensive description of issues discussed during supervision sessions.
 - c. The results of each clinical documentation review by the supervisor.
- 15. All quarterly supervision reports shall include a copy of clinical supervision documentation maintained for that quarter. All clinical supervision documentation maintained by the supervisor shall comply with requirements set forth in A.A.C. R4-6-212(C).
- 16. After Respondent's probationary period, the supervisor shall submit a final summary report for review and approval by the Board Chair or designee. The final report shall

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also contain a recommendation as to whether the Respondent should be released from this Consent Agreement.

Change of Clinical Supervisor During Probation

17. If, during the period of Respondent's probation, the clinical supervisor determines that they cannot continue as the clinical supervisor, they shall notify the Board within 10 days of the end of supervision and provide the Board with an interim final report. Respondent shall advise the Board Chair or designee within 30 days of cessation of clinical supervision by the approved clinical supervisor and provide the name of a new proposed clinical supervisor. The proposed clinical supervisor shall provide the same documentation to the Board as was required of the initial clinical supervisor.

GENERAL PROVISIONS

Provision of Clinical Supervision

18. Respondent shall not provide clinical supervision to associate level licensees accruing and submitting hours towards independent licensure while subject to this Consent Agreement.

Civil Penalty

- 19. Subject to the provisions set forth in paragraph 20, the Board imposes a civil penalty against the Respondent in the amount of \$1,000.00.
- 20. Respondent's payment of the civil penalty shall be stayed so long as Respondent remains compliant with the terms of this Consent Agreement. If Board staff determines that Respondent is noncompliant with the terms of this Consent Agreement in any respect, with the exception of the tolling provision under paragraph 3, the stay of the civil penalty payment shall be automatically lifted and payment of the civil penalty shall be made by certified check of money order payable to the Board within 30 days after being notified in writing of the lifting of the stay.

- 21. Within 10 days of being notified of the lifting of the stay, Respondent may request that the matter be reviewed by the Board for the limited purpose of determining whether the automatic lifting of the stay was supported by clear and convincing evidence. If the Board receives the written request within 10 days or less of the next regularly scheduled Board meeting, the request will not be heard at that meeting, but will be heard at the next regularly scheduled Board meeting. The Board's decision on this matter shall not be subject to further review.
- 22. The Board reserves the right to take further disciplinary action against Respondent for noncompliance with this Consent Agreement after affording Respondent notice and an opportunity to be heard. If a complaint is filed against Respondent for failure to comply with this Consent Agreement, the Board shall have continuing jurisdiction until the matter is final and the period of probation shall be extended until the matter is final.
- 23. If Respondent currently sees clients in their own private practice, and obtains any other type of behavioral health position, either as an employee or independent contractor, where they provide behavioral health services to clients of another individual or agency, they shall comply with requirements set forth in paragraphs 25 through 27 below.
- 24. Within 10 days of the effective date of this Order, if Respondent is working in a position where Respondent provides any type of behavioral health related services or works in a setting where any type of behavioral health, health care, or social services are provided, Respondent shall provide the Board Chair or designee with a signed statement from Respondent's employer(s) confirming Respondent provided the employer(s) with a copy of this Consent Agreement. If Respondent does not provide the employer's statement to the Board within 10 days of the effective date, the Board will provide Respondent's employer(s) with a copy of the Consent Agreement.

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25. If Respondent is not employed as of the effective date of this Order, within 10 days of accepting employment in a position where Respondent provides any type of behavioral health related services or in a setting where any type of behavioral health, health care, or social services are provided, Respondent shall provide the Board Chair or designee with a written statement providing the contact information of their new employer and a signed statement from Respondent's new employer confirming Respondent provided the employer with a copy of this Consent Agreement. If Respondent does not provide the employer's statement to the Board within 10 days, as required, Respondent's failure to provide the required statement to the Board shall be deemed a violation of A.R.S. § 32-3251(16)(n) and the Board will provide Respondent's employer(s) with a copy of the Consent Agreement.

26. If, during the period of Respondent's probation, Respondent changes employment, resigns, is involuntarily terminated, resigns in lieu of termination, or goes on extended leave of absence for whatever reason that may impact their ability to timely comply with the terms of probation, Respondent shall, within 10 days of the aforementioned acts, inform the Board of their change of employment status. After the change and within 10 days of accepting employment in a position where Respondent provides any type of behavioral health related services or in a setting where any type of behavioral health, health care, or social services are provided, Respondent shall provide the Board Chair or designee a written statement providing the contact information of their new employer(s) and a signed statement from Respondent's new employer(s) confirming Respondent provided the employer(s) with a copy of this Consent Agreement. If Respondent does not provide the employer's statement to the Board within 10 days, as required, Respondent's failure to provide the required statement to the Board shall be deemed a violation of A.R.S. § 32-3251(16)(n) and the Board will provide Respondent's employer(s) with a copy of the Consent Agreement.

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- 27. Respondent shall practice behavioral health using the name under which they are licensed. If Respondent changes their name, they shall advise the Board of the name change as prescribed under the Board's regulations and rules.
- 28. Prior to the release of Respondent from probation, Respondent must submit a written request to the Board for release from the terms of this Consent Agreement at least 30 days prior to the date they would like to have this matter appear before the Board. Respondent may appear before the Board, either in person or telephonically. Respondent must provide evidence that they have successfully satisfied all terms and conditions in this Consent Agreement. The Board has the sole discretion to determine whether all terms and conditions of this Consent Agreement have been met and whether Respondent has adequately demonstrated that they have addressed the issues contained in this Consent Agreement. In the event that the Board determines that any or all terms and conditions of this Consent Agreement have not been met, the Board may conduct such further proceedings as it determines are appropriate to address those matters.
- 29. Respondent shall bear all costs relating to probation terms required in this Consent Agreement.
- 30. Respondent shall be responsible for ensuring that all documentation required in this Consent Agreement is provided to the Board in a timely manner.
 - 31. This Consent Agreement shall be effective on the date of entry below.
- 32. This Consent Agreement is conclusive evidence of the matters described herein and may be considered by the Board in determining appropriate sanctions in the event a subsequent violation occurs.

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2	PROFESSIONAL ACCEPTS, SIGNS AND DATES THIS CONSENT AGREEMEN			
3	Tateigna Thompson (Vep 21, 2023 13.221 DT)	p 21, 2023		
4	Taleigha M. Thompson Date	е		
5	BOARD ACCEPTS, SIGNS AND DATES THIS CO	NSENT AGREEMENT		
6	By: Mr. Zarola Oc	t 10, 2023		
7	TOBI ZAVALA, Executive Director Date			
8	Arizona Board of Behavioral Health Examiners			
9	ORIGINAL of the foregoing filed Oct 10, 2023			
10				
11	Arizona Board of Behavioral Health Examiners 1740 West Adams Street, Suite 3600 Phoenix, AZ 85007			
12				
13	EXECUTED COPY of the foregoing sent electronically Oct 10, 2023			
14				
15	Mona Baskin Assistant Attorney General			
16	2005 North Central Avenue Phoenix, AZ 85004			
17	Taleigha M. Thompson			
18	Address of Record Respondent			
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