

1 **BEFORE THE ARIZONA BOARD**  
2 **OF BEHAVIORAL HEALTH EXAMINERS**

3 **In the Matter of:**

4 **Lindsey R. Jones, LPC-15408,**  
5 **Licensed Professional Counselor,**  
6 **In the State of Arizona.**

7 **RESPONDENT**

**CASE NO. 2021-0113**  
**2021-0114**

**CONSENT AGREEMENT**

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

14 **RECITALS**

15 Respondent understands and agrees that:

16 1. Any record prepared in this matter, all investigative materials prepared or  
17 received by the Board concerning the allegations, and all related materials and exhibits may be  
18 retained in the Board's file pertaining to this matter.

19 2. Respondent has the right to a formal administrative hearing at which Respondent  
20 can present evidence and cross examine the State's witnesses. Respondent hereby irrevocably  
21 waives their right to such formal hearing concerning these allegations and irrevocably waives  
22 their right to any rehearing or judicial review relating to the allegations contained in this Consent  
23 Agreement.

24 3. Respondent has the right to consult with an attorney prior to entering into this  
25 Consent Agreement.

1           4.     Respondent acknowledges and agrees that upon signing this Consent  
2 Agreement and returning it to the Board's Executive Director, Respondent may not revoke their  
3 acceptance of this Consent Agreement or make any modifications to it. Any modification of this  
4 original document is ineffective and void unless mutually approved by the parties in writing.

5           5.     The findings contained in the Findings of Fact portion of this Consent Agreement  
6 are conclusive evidence of the facts stated herein between only Respondent and the Board for  
7 the final disposition of this matter and may be used for purposes of determining sanctions in any  
8 future disciplinary matter.

9           6.     This Consent Agreement is subject to the Board's approval, and will be effective  
10 only when the Board accepts it. In the event the Board in its discretion does not approve this  
11 Consent Agreement, this Consent Agreement is withdrawn and shall be of no evidentiary value,  
12 nor shall it be relied upon or introduced in any disciplinary action by any party hereto, except  
13 that Respondent agrees that should the Board reject this Consent Agreement and this case  
14 proceeds to hearing, Respondent shall assert no claim that the Board was prejudiced by its  
15 review and discussion of this document or of any records relating thereto.

16          7.     Respondent acknowledges and agrees that the acceptance of this Consent  
17 Agreement is solely to settle this Board matter and does not preclude the Board from instituting  
18 other proceedings as may be appropriate now or in the future. Furthermore, and  
19 notwithstanding any language in this Consent Agreement, this Consent Agreement does not  
20 preclude in any way any other state agency or officer or political subdivision of this state from  
21 instituting proceedings, investigating claims, or taking legal action as may be appropriate now or  
22 in the future relating to this matter or other matters concerning Respondent, including but not  
23 limited to violations of Arizona's Consumer Fraud Act. Respondent acknowledges that, other  
24 than with respect to the Board, this Consent Agreement makes no representations, implied or

25 ...

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

3 8. Respondent understands that once the Board approves and signs this Consent  
4 Agreement, it is a public record that may be publicly disseminated as a formal action of the  
5 Board, and that it shall be reported as required by law to the National Practitioner Data Bank.

6 9. Respondent further understands that any violation of this Consent Agreement  
7 constitutes unprofessional conduct pursuant to A.R.S. § 32-3251(16)(n) and may result in  
8 disciplinary action pursuant to A.R.S. § 32-3281.

9 10. The Board therefore retains jurisdiction over Respondent and may initiate  
10 disciplinary action against Respondent if it determines that they have failed to comply with the  
11 terms of this Consent Agreement or of the practice act.

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

13 **FINDINGS OF FACT**

14 1. Respondent is the holder of License No. LPC-15408 for the practice of  
15 counseling in the state of Arizona.

16 2. In 03/20, an adult male client ("Client") began receiving services at a behavioral  
17 health agency ("Agency") for substance use issues.

18 3. In 06/20, Client began participating in domestic violence group sessions at  
19 Agency with Respondent.

20 4. Client's clinical record at Agency documents the following vulnerabilities:

- 21 a. Suicide attempts
- 22 b. Substance use issues including:
- 23 ▪ Severe and continuous chronic alcoholism
  - 24 ▪ Opioid use disorder
  - 25 ▪ Cannabis use disorder

1                   ▪ Cocaine use disorder

2           c. History of physical and sexual abuse.

3           d. Feelings of:

4                   ▪ Shame

5                   ▪ Humiliation

6                   ▪ Depression

7                   ▪ Despair

8                   ▪ Hopelessness

9           5. Despite Client's vulnerabilities, Respondent began an inappropriate and dual  
10 relationship with Client.

11           6. Between 06/23/20 and 03/28/21, Respondent exchanged the following  
12 communications with Client on her Agency issued cellular phone:

13                   a. Over 2,000 text messages

14                   b. Nearly 100 picture messages

15                   c. 162 phone calls

16           7. These text messages were neither included, nor referenced in the clinical record,  
17 which would have been required if they served a therapeutic purpose.

18           8. As part of an internal investigation, Agency analyzed 569 of Respondent's text  
19 message exchanges with Client and determined 65% of the messages occurred outside of  
20 Respondent's scheduled work hours.

21           9. Agency's analysis of text message exchanges between Respondent and another  
22 male client ("M.D.") revealed the following:

23                   a. During a one-month period, Respondent and M.D. exchanged over 1,000 text  
24 messages.

25                   b. 19% of the exchanges occurred on weekends and holidays.

1           10.     Additionally, during a single day in 12/20, Respondent exchanged nearly 99 text  
2 messages with Client on her personal phone.

3           11.     The text messages exchanged between Licensee and Client were highly  
4 inappropriate and non-therapeutic, including the following:

- 5           a.     Licensee regularly addressed Client using nicknames that had a personal  
6                 connotation.
- 7           b.     On several occasions, Licensee conveyed her own alcohol consumption in a  
8                 non-therapeutic way.
- 9           c.     On more than one occasion, Licensee referred to an immediate family  
10                member using their name.
- 11          d.     Licensee sent Client a picture of herself, with an attached message that  
12                 referred to her personal appearance.

13          12.     Despite the following alcohol related vulnerabilities that were documented in  
14 Client's clinical record at Agency, Respondent sent Client messages regarding her own desire  
15 to consume alcohol:

- 16          a.     Client's clinical record includes the following:
  - 17                ▪     Client appears to need alcohol or drug treatment/recovery but is  
18                        ambivalent or feels it is unnecessary.
  - 19                ▪     Part of Client's crisis plan was to be around sober friends.
  - 20                ▪     Client needs to increase his supports for sobriety.
  - 21                ▪     Client identifies a trigger as being around people that drink.
- 22          b.     Client's clinical record includes the following entries specifically documented  
23                 by Respondent:
  - 24                ▪     Client struggles with sobriety and continues to drink at times, but is  
25                        motivated to reduce or quit completely.

- 1                   ▪ Alcohol is Client's substance of choice.
- 2                   ▪ Client identified his reasons for domestic violence, which include alcohol
- 3                   and drug abuse.
- 4                   ▪ Client received an extreme DUI during the time he was receiving
- 5                   behavioral health services from Respondent.

6           13. By discussing her own alcohol consumption with Client in a non-therapeutic way,  
7 it appears Respondent condoned, minimized and emboldened Client's habitual use of alcohol.

8           14. Additionally, the following occurred on 02/18/21:

- 9           a. Respondent sent Client a text indicating she spoke positively of Client's
- 10           progress to GYAR.
- 11           b. Respondent entered a note in Client's clinical record at Agency indicating that
- 12           Gilbert Youth and Adult Resources (GYAR) were not aware how well Client
- 13           was doing and the judge would take that into consideration.
- 14           c. GYAR entered a note in their file indicating Respondent reported that Client
- 15           has made tremendous progress.

16           15. While Respondent provided positive information to GYAR on 02/18/21 regarding  
17 Client's progress, some of the text messages indicate that Client consumed alcohol on several  
18 occasions within days of Licensee conveying the positive information to GYAR.

19           16. Furthermore, in 02/21, Respondent prepared an assessment and summary for  
20 Client regarding his 09/20 extreme DUI charge.

21           17. Despite receiving a text 5 days earlier indicating that Client was having a  
22 margarita, the summary indicated that Client is not likely to continue use of alcohol.

23           18. Respondent represented the following regarding the 02/21 assessment:

- 24           a. These were Client's self-assessment.

25 ...

1           b. Because Client was self-reporting, Respondent does not add her own  
2           interpretation to the self-assessment tool, and only provides the Court with a  
3           recommendation for hours of treatment and proof of screening.

4           19. Although Respondent represents the assessment was a self-report and not her  
5           interpretation, Respondent should have documented in her Agency's records for Client that  
6           Client's self-assessment did not accurately reflect Client's alcohol use patterns in light of other  
7           statements made by Client outside of his responses on the self-assessment.

8           20. Additionally, Board staff's investigation revealed that during multiple group  
9           sessions, Respondent and Client were texting each other and during one individual session  
10          Respondent called Client.

11          21. Respondent texting Client during sessions had the potential of depriving him of  
12          the full scope of therapy available to him.

13          22. The time Respondent spent texting Client during group sessions also potentially  
14          deprived other clients of the full scope of the therapy available to them.

15          23. Respondent represented the following regarding texting Client during group  
16          sessions:

17               a. There was no reason for her to text a client while in a group session.

18               b. These group sessions may have ended early and Respondent forgot to  
19               accurately document the session duration in her note.

20          24. Respondent represented the following regarding calling Client during an  
21          individual session:

22               a. Respondent wonders whether she called Client during the time noted for the  
23               individual session to tell him she was running late.

24               b. Respondent may have done this and billed for the 60-minute duration but did  
25               not document that the session took place later than noted.

1           25.    Respondent represented the following:

2                   a.    Respondent has experienced compassion fatigue and vicarious trauma.

3                   b.    Respondent has overstepped bounds that she knows are not professional.

4                   c.    Overstepping her bounds came from a place of pure intentions, care and  
5                   concern.

6                   d.    Respondent has recognized experiencing transference and did not realize it  
7                   was happening.

8                   e.    Respondent currently attends therapy weekly.

9           26.    While Respondent represents overstepping her bounds came from a place of  
10    pure intentions, care and concern, her actions crossed a professional boundary that ultimately  
11    give rise to statutes and ethical codes prohibiting counselors from having dual relationships.

12           27.    During approximately 9 months of providing behavioral health services to Client,  
13    Respondent exchanged over 2,000 text messages and 162 phone calls with Client.

14           28.    Although Respondent represents she exchanged therapeutic text messages and  
15    phone calls with Client, Respondent failed to document the following:

16                   a.    There are no copies or printouts of text messages in Client's clinical record.

17                   b.    There are no notes or entries indicating any information came from text  
18                   message exchanges.

19                   c.    Only 1 of the 162 phone calls was documented in Client's clinical record.

20           29.    Additionally, Respondent represented the following regarding the length and time  
21    of sessions:

22                   a.    Several group sessions Client attended did not meet for the entire time they  
23                   were originally scheduled.

24                   b.    At least one individual session did not occur at the scheduled time.

25    ...





1 **Stayed Suspension**

2 1. As of the effective date of this Consent Agreement, Respondent's license, LPC-  
3 15408, shall be **SUSPENDED** for 24 months. However, the suspension shall be stayed and  
4 Respondent's license shall be placed on probation.

5 2. During the stayed suspension portion of the Order, if Respondent is  
6 noncompliant with the terms of the Order in any way, the stay of the suspension shall be lifted  
7 and Respondent's license shall be automatically suspended as set forth above.

8 3. If Respondent contests the lifting of the stay as it relates to this paragraph,  
9 Respondent shall request in writing, within 10 days of being notified of the automatic  
10 suspension of licensure, that the matter be placed on the Board agenda for the Board to review  
11 and determine if the automatic suspension of Respondent's license was supported by clear and  
12 convincing evidence.

13 4. If the written request is received within 10 days of a regularly scheduled Board  
14 meeting, the request will not be heard at that meeting, but will be heard at the next regularly  
15 scheduled Board meeting.

16 5. Pending the Board's review, Respondent's license shall be reported as  
17 suspended - under review. Respondent may not work in any capacity as a licensed behavioral  
18 health professional pending the Board's review. The Board's decision and Order shall not be  
19 subject to further review.

20 6. Respondent's license, LPC-15408, will be placed on probation for 24 months,  
21 effective from the date of entry as signed below.

22 7. Respondent shall not practice under their license, LPC-15408, unless they are  
23 fully compliant with all terms and conditions in this Consent Agreement. If, for any reason,  
24 Respondent is unable to comply with the terms and conditions of this Consent Agreement, they  
25 shall immediately notify the Board in writing and shall not practice under their license until they

1 submit a written request to the Board to re-commence compliance with this Consent  
2 Agreement. All such requests shall be pre-approved by the Board Chair or designee.

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

### 7 **Continuing Education**

8 9. In addition to the continuing education requirements of A.R.S. § 32-3273, within  
9 12 months of the effective date of this Consent Agreement, Respondent shall complete 6 clock  
10 hours of the NASW Staying Out of Trouble continuing education course or an equivalent course  
11 addressing current behavioral health documentation standards in Arizona. All required  
12 continuing education shall be pre-approved by the Board Chair or designee. Upon completion,  
13 Respondent shall submit a certificate of completion of the required continuing education.

14 10. In addition to the continuing education requirements of A.R.S. § 32-3273, within  
15 12 months of the effective date of this Consent Agreement, Respondent shall complete 6 clock  
16 hours of continuing education addressing current behavioral health documentation standards in  
17 Arizona. All required continuing education shall be pre-approved by the Board Chair or  
18 designee. Upon completion, Respondent shall submit a certificate of completion of the required  
19 continuing education.

20 11. In addition to the continuing education requirements of A.R.S. § 32-3273, within  
21 12 months of the effective date of this Consent Agreement, Respondent shall complete 12 clock  
22 hours of continuing education addressing substance abuse counseling provided by a general  
23 mental health counselor, to include co-occurring disorders. All required continuing education  
24 shall be pre-approved by the Board Chair or designee. Upon completion, Respondent shall  
25 submit a certificate of completion of the required continuing education.



1 **Focus and Frequency of Clinical Supervision**

2 15. The focus of the supervision shall relate to the nature of the complaint, current  
3 behavioral health documentation standards in Arizona, statutes and rules affecting the practice  
4 of behavioral health in Arizona, behavioral health ethics, boundaries, scope of practice and  
5 transference. Respondent shall meet individually in person with the supervisor for a minimum of  
6 one hour weekly, if working fulltime, for the first 12 months of the agreement, then at the  
7 recommendation of the supervisor for the remaining 12 months, but not less than one hour  
8 monthly if working fulltime.

9 **Reports**

10 16. Once approved, the supervisor shall submit quarterly reports for review and  
11 approval by the Board Chair or designee. The quarterly reports shall include issues presented in  
12 this Consent Agreement that need to be reported and the supervisor shall notify the Board if  
13 more frequent supervision is needed. Quarterly reports shall include the following:

- 14 a. Dates of each clinical supervision session.
- 15 b. A comprehensive description of issues discussed during supervision  
16 sessions.

17 17. All quarterly supervision reports shall include a copy of clinical supervision  
18 documentation maintained for that quarter. All clinical supervision documentation maintained by  
19 the supervisor shall comply with requirements set forth in A.A.C. R4-6-212(C).

20 18. After Respondent's probationary period, the supervisor shall submit a final  
21 summary report for review and approval by the Board Chair or designee. The final report shall  
22 also contain a recommendation as to whether the Respondent should be released from this  
23 Consent Agreement.

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1 **Change of Clinical Supervisor During Probation**

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

9 **Therapy**

10 20. During the period of probation, Respondent shall attend therapy for 24 months  
11 with a masters or higher level behavioral health professional licensed at the independent level.  
12 Within 30 days of the date of this Consent Agreement, Respondent shall submit the name of  
13 their therapist and the therapist's curriculum vitae for pre-approval by the Board Chair or  
14 designee. Also within 30 days of the date of this Consent Agreement, the therapist shall submit  
15 a letter addressing why they should be approved, acknowledging that they have reviewed the  
16 Consent Agreement and include the results of an initial assessment and a treatment plan  
17 regarding the proposed treatment of Respondent.

18 21. Upon approval, the Board will provide the therapist with copies of any required  
19 evaluations completed at the request of the Board prior to this Consent Agreement and the  
20 Board's investigative report.

21 **Focus and Frequency of Therapy**

22 22. The focus of the therapy shall relate to the nature of the complaint, self-care,  
23 trauma, decision-making and insight. Respondent shall meet in person with the therapist twice  
24 monthly for the first 12 months, then at the recommendation of the therapist for the remaining 12  
25 months, but no less than once monthly.

1 **Reports**

2 23. Once approved, the therapist shall submit quarterly reports and a final summary  
3 report to the Board for review and approval. The quarterly reports shall include issues presented  
4 in this Consent Agreement that need to be reported and the therapist shall notify the Board if  
5 more frequent therapy is needed. The reports shall address Respondent's current mental health  
6 status, medications prescribed, if any, treatment recommendation, and shall report if, in their  
7 professional opinion, Respondent becomes unable to practice psychotherapy safely and  
8 ...  
9 competently. The final report shall also contain a recommendation as to whether the  
10 Respondent should be released from this Consent Agreement.

11 **GENERAL PROVISIONS**

12 **Provision of Clinical Supervision**

13 24. Respondent shall not provide clinical supervision while subject to this Consent  
14 Agreement.

15 **Civil Penalty**

16 25. Subject to the provisions set forth in paragraph 26, the Board imposes a civil  
17 penalty against the Respondent in the amount of \$1,000.00.

18 26. Respondent's payment of the civil penalty shall be stayed so long as Respondent  
19 remains compliant with the terms of this Consent Agreement. If Board staff determines that  
20 Respondent is noncompliant with the terms of this Consent Agreement in any respect, with the  
21 exception of the tolling provision under paragraph 8, the stay of the civil penalty payment shall  
22 be automatically lifted and payment of the civil penalty shall be made by certified check or  
23 money order payable to the Board within 30 days after being notified in writing of the lifting of  
24 the stay.

25 ...

1           27.     Within 10 days of being notified of the lifting of the stay, Respondent may request  
2 that the matter be reviewed by the Board for the limited purpose of determining whether the  
3 automatic lifting of the stay was supported by clear and convincing evidence. If the Board  
4 receives the written request within 10 days or less of the next regularly scheduled Board  
5 meeting, the request will not be heard at that meeting, but will be heard at the next regularly  
6 scheduled Board meeting. The Board's decision on this matter shall not be subject to further  
7 review.

8           28.     The Board reserves the right to take further disciplinary action against  
9 Respondent for noncompliance with this Consent Agreement after affording Respondent notice  
10 and an opportunity to be heard. If a complaint is filed against Respondent for failure to comply  
11 with this Consent Agreement, the Board shall have continuing jurisdiction until the matter is final  
12 and the period of probation shall be extended until the matter is final.

13           29.     If Respondent currently sees clients in their own private practice, and obtains any  
14 other type of behavioral health position, either as an employee or independent contractor, where  
15 they provide behavioral health services to clients of another individual or agency, they shall  
16 comply with requirements set forth in paragraphs 30 through 32 below.

17           30.     Within 10 days of the effective date of this Order, if Respondent is working in a  
18 position where Respondent provides any type of behavioral health related services or works in a  
19 setting where any type of behavioral health, health care, or social services are provided,  
20 Respondent shall provide the Board Chair or designee with a signed statement from  
21 Respondent's employer(s) confirming Respondent provided the employer(s) with a copy of this  
22 Consent Agreement. If Respondent does not provide the employer's statement to the Board  
23 within 10 days of the effective date, the Board will provide Respondent's employer(s) with a  
24 copy of the Consent Agreement.

25 ...



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

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

25 ...

1           33.     Respondent shall practice behavioral health using the name under which they  
2 are licensed. If Respondent changes their name, they shall advise the Board of the name  
3 change as prescribed under the Board's regulations and rules.

4           34.     Prior to the release of Respondent from probation, Respondent must submit a  
5 written request to the Board for release from the terms of this Consent Agreement at least 30  
6 days prior to the date they would like to have this matter appear before the Board. Respondent  
7 may appear before the Board, either in person or telephonically. Respondent must provide  
8 evidence that they have successfully satisfied all terms and conditions in this Consent  
9 Agreement. The Board has the sole discretion to determine whether all terms and conditions of  
10 this Consent Agreement have been met and whether Respondent has adequately demonstrated  
11 that they have addressed the issues contained in this Consent Agreement. In the event that the  
12 Board determines that any or all terms and conditions of this Consent Agreement have not been  
13 met, the Board may conduct such further proceedings as it determines are appropriate to  
14 address those matters.

15           35.     Respondent shall bear all costs relating to probation terms required in this  
16 Consent Agreement.

17           36.     Respondent shall be responsible for ensuring that all documentation required in  
18 this Consent Agreement is provided to the Board in a timely manner.

19           37.     This Consent Agreement shall be effective on the date of entry below.

20           38.     This Consent Agreement is conclusive evidence of the matters described herein  
21 and may be considered by the Board in determining appropriate sanctions in the event a  
22 subsequent violation occurs.

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**PROFESSIONAL ACCEPTS, SIGNS AND DATES THIS CONSENT AGREEMENT**

  
Lindsay R. Jones (Jul 1, 2021 13:10 PDT)  
Lindsey R. Jones

Jul 1, 2021  
Date

**BOARD ACCEPTS, SIGNS AND DATES THIS CONSENT AGREEMENT**

By:   
TOBI ZAVALA, Executive Director  
Arizona Board of Behavioral Health Examiners

Jul 1, 2021  
Date

**ORIGINAL** of the foregoing filed Jul 1, 2021  
with:

Arizona Board of Behavioral Health Examiners  
1740 West Adams Street, Suite 3600  
Phoenix, AZ 85007

**EXECUTED COPY** of the foregoing sent electronically Jul 1, 2021  
to:

Mona Baskin  
Assistant Attorney General  
2005 North Central Avenue  
Phoenix, AZ 85004

Lindsey R. Jones  
Address of Record  
Respondent

Flynn P. Carey  
One Renaissance Square  
2 North Central Avenue, Suite 1450  
Phoenix, AZ 85004  
Attorney for Respondent