

STATE OF MICHIGAN  
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES  
BUREAU OF HEALTH SERVICES  
BOARD OF PSYCHOLOGY  
DISCIPLINARY SUBCOMMITTEE

In the Matter of

CAROL S. JONES, Ed.D.

Complaint No. 63-99-1919-00

AMENDED ADMINISTRATIVE COMPLAINT

Attorney General Jennifer M. Granholm, through Assistant Attorney General Howard C. Marderosian, on behalf of the Department of Consumer & Industry Services, Bureau of Health Services (Complainant), and amend the complaint filed on March 27, 2001 against Carol S. Jones, Ed.D., (Respondent), to provide as follows:

1. The Board of Psychology, (Board), an administrative agency established by the Public Health Code, 1978 PA 368, as amended; MCL 333.1101 *et seq*; MSA 14.15(1101) *et seq*, is empowered to discipline licensees under the Code through its Disciplinary Subcommittee (DSC).

2. Respondent is currently licensed to practice psychology pursuant to the Public Health Code.

3. Section 16221(a) of the Public Health Code provides the DSC with authority to take disciplinary action against Respondent for a violation of general duty, consisting of negligence or failure to exercise due care, including negligent delegation to, or supervision of employees or

other individuals, whether or not injury results, or any conduct, practice, or condition which impairs or may impair, the ability to safely and skillfully practice medicine.

4. Section 16221(b)(i) of the Public Health Code provides the DSC with authority to take disciplinary action against Respondent for incompetence as defined at section 16106(1) as a departure from, or failure to conform to, minimal standards of acceptable and prevailing practice for the health profession, whether or not actual injury to an individual occurs.

5. Section 16226 of the Public Health Code authorizes the DSC to impose sanctions against persons licensed by the Board if, after opportunity for a hearing, the DSC determines that a licensee has violated one or more of the subdivisions contained in section 16221 of the Public Health Code.

#### Factual Allegations

6. Beginning in 1989 and continuing thereafter, Respondent provided therapy to patient M.P. (initials will be used to protect the privacy of the individual).

7. M.P. married R.P. in 1982. The couple separated in 1996; they divorced in 1998. During the marriage, they had two children. Beginning with the separation, the couple had numerous disagreements regarding custody and visitation of the children. M.P. insisted that a chaperone be present during any visitation R.P. had with the children. In an effort to resolve matters, R.P. agreed to supervised visitation of the children during the period they were

separated. However, when the circuit court issued the divorce decree, the court order provided for custody and visitation of the children.

8. The December 14, 1998 divorce order ordered an assessment of the entire family by Shirley Gallagher, Ed.D. The assessment conducted by Dr. Gallagher concluded that R.P. did not pose a risk to the children and there was no need for supervised visitation. Dr. Gallagher recommended family counseling. However, despite this finding, M.P., supported by Respondent, attempted to make every effort to prevent R.P. from obtaining unsupervised visitation with the children.

9. At no time during the relevant time period in this complaint was Respondent the therapist to R.P., nor had Respondent conducted any evaluation or assessment of R.P. Further, Respondent had not been involved in any treatment or assessment of the children of M.P. and R.P.

10. During the time period between the separation and divorce, the family entered into therapy with several different health care providers, all of whom concluded that R.P. did not represent a threat to the children and that there was not a need for supervised visits.

11. M.P. and R.P. discontinued therapy with Dr. Gallagher in December, 1997. After ending therapy, M.P. refused to allow R.P. unsupervised visitation with the children. As a result of the dispute, the court entered an order on February 2, 1999, which provided that M.P. could select from three counselors identified by the Court to assist the children. Mary Wassink, Ed.D.

was selected. Dr. Wassink's role was set forth in the February 2, 1999 order on page 2 as follows:

1. . . . The counseling is intended to:
  - a. Monitor and assist the children's adjustment to father/child contacts.
  - b. Make recommendations in regards to delaying implementations of the planned parenting time steps; and the need for selection of supervisor.
  - c. Report to the Court as to the children's adjustment and the parents' cooperation with this counseling and parenting time process.

Both parents will be involved in the counseling as the counselor deems needed. This may include sessions with the father and \*\*\*\* or with \*\*\*\*\* or with both children. Uninsured counseling costs will be shared by the parents under the medical support provision in the 6/9/97 Order. The parents will sign release forms with the counselor so that the counselor and the Friend of the Court may have a free and open dialogue regarding this required counseling.

(Note: Childrens' names omitted to protect their privacy.)

12. Following the court's order, Dr. Wassink contacted Respondent. During the discussion, Respondent provided a negative assessment of R.P. and his relationship with his children. Respondent informed Dr. Wassink that R.P. was abusive to M.P. and that he abused alcohol.

13. On August 2, 1999, Respondent met with Dr. Wassink. At the meeting, Respondent questioned Dr. Wassink about her current knowledge of R.P. and his involvement in an alcohol treatment program. Dr. Jones attempted to obtain further information regarding R.P. Dr. Wassink said she was unable to disclose further information because of confidentiality concerns. During this same meeting, Respondent raised questions regarding Dr. Wassink's qualifications and ability to treat the children. Respondent advised Dr. Wassink that she (Dr. Wassink) did not have adequate knowledge and training to treat children. Respondent also questioned the

qualifications of Dr. Wassink. Further, it was clear that Respondent was an advocate for M.P. in her custody and visitation dispute with R.P. and that Respondent attempted to undermine Dr. Wassink's role as the children's therapist.

14. Following the observation and treatment of the children by Dr. Wassink, she believed it necessary to obtain input of a consultant for the family. Collin Ross, M.D. of Dallas, Texas agreed to act in this role and meet with the family. However, when Respondent became aware of Dr. Ross' potential involvement in the case, she attempted to contact Dr. Ross regarding the family; as a result, Dr. Ross withdrew from the case.

15. Respondent made numerous attempts to interfere with the therapy conducted by Dr. Wassink by making statements related to R.P.'s ability to have custody and visitation with his children. These statements were made by Respondent without ever having conducted an evaluation of R.P.

16. Respondent also contacted caseworkers and other employees of Kalamazoo Family & Children Services to report that R.P. was abusive toward M.P., that it was not in the children's best interest to have contact with R.P., and that R.P. was involved in a 12-step alcoholic rehabilitation program. These attempts to act as an advocate for M.P. undermined R.P.'s efforts to obtain custody and/or visitation with his children through appropriate court proceedings. In addition, Respondent contacted Kalamazoo Family & Children Services to report that a caseworker had inappropriately touched R.P. in the presence of the children. This allegation was not true

17. Based upon the foregoing, Respondent's conduct is in violation of section 16221(a) and (b)(i) of the Public Health Code as follows:

- A) Respondent, in her role as a therapist for M.P., acted improperly as she became an advocate for M.P. in the child custody dispute with R.P.
- B) Respondent made inappropriate comments related to R.P.'s ability to have visitation with his children, which were not based upon a psychological assessment or evaluation of R.P.
- C) Respondent communicated information regarding R.P. to Dr. Wassink and the Kalamazoo Family & Children Services without an evaluation or assessment of R.P. or the children.
- D) Respondent assumed a role which was in opposition to Dr. Wassink's effort to resolve the custody and visitation dispute between R.P. and M.P. concerning their children.
- E) Respondent exceeded her role as a therapist for M.P. and improperly communicated information regarding R.P. to Kalamazoo Family & Children Services.

THEREFORE, Complainant requests that this complaint be served upon Respondent and that Respondent be offered an opportunity to show compliance with all lawful requirements for retention of the aforesaid license. If compliance is not shown, Complainant further requests that formal proceedings be commenced pursuant to the Public Health Code, rules promulgated pursuant to it, and the Administrative Procedures Act of 1969, 1969 PA 306, as amended; MCL 24.201 *et seq*; MSA 3.560(101) *et seq*.

RESPONDENT IS HEREBY NOTIFIED that, pursuant to section 16231(7) of the Public Health Code, Respondent has 30 days from receipt of this complaint to submit a written response

to the allegations contained in it. The written response shall be submitted to the Bureau of Health Services, Department of Consumer & Industry Services, P.O. Box 30670, Lansing, Michigan, 48909, with a copy to the undersigned assistant attorney general. Further, pursuant to section 16231(8), failure to submit a written response within 30 days shall be treated as an admission of the allegations contained in the complaint and shall result in transmittal of the complaint directly to the Board's Disciplinary Subcommittee for imposition of an appropriate sanction.

Respectfully Submitted,

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Attorney General



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Dated: April 11, 2001

hcm01.cases.jones.p.amendedcomplaint