

1. The Board has complied with all notice, procedural and other requirements relating to the Respondent and this matter imposed by all applicable law.

2. The Board has jurisdiction over the person of the Respondent in this matter and over the subject matter of this proceeding.

3. Pursuant to, *inter alia*, N.C. Gen. Stat. §90-270.60 (2017), the Board is empowered, under certain circumstances, to take disciplinary action against licensees.

4. The parties have agreed to the resolution of this matter by the entry of this Consent Order in the interests of avoiding costly litigation and delay, and the Board and the Respondent consent and agree to be bound by the terms of this Consent Order.

5. The Respondent expressly waives any right she may have to a hearing in this matter and to any judicial review of this matter.

6. At her own expense, the Respondent shall complete nine (9) hours of Marriage and Family Therapy ethics education within one (1) year from the effective date of this Consent Order. At least three (3) of the nine (9) hours of Marriage and Family Therapy ethics education shall specifically focus on the topic of Professional Identity and Ethics with the coursework focusing on establishing, maintaining and conducting a professional decorum and shall include a focus on the Code of Ethics. At least another three (3) of the nine (9) hours shall focus on the use of technology in clinical practice as denoted in the Code of Ethics, sections, 6.1 through 6.6.

7. Prior to taking said ethics education course work, the Respondent shall submit to the Board for its approval course outlines for all such course work. No such course work shall satisfy this requirement unless the courses are pre-approved in writing by the Board.

8. After taking said ethics education course work, the Respondent shall promptly submit to the Board a certificate(s) of course completion.

9. The Respondent agrees to continue as a Licensed Marriage and Family Therapy Associate (LMFTA) for at least one year from the date this Consent Order is signed.

10. The Respondent shall renew her LMFTA license by July 1, 2018.

11. The Respondent shall complete fifty (50) hours of supervision at the rate of two (2) hours, every other week with a Supervisor approved by the Board.

12. The Respondent's current supervisor is acceptable to the Board, but if Respondent proposes to change supervisors, she must notify the Board and obtain advance Board approval of any new, proposed supervisor.

13. The Supervision Report for Respondent must be submitted on a specific Board approved report form, attached as an exhibit to this Consent Order.

14. The Supervision Report must be received by the Board's office, monthly, by the 10th day of every month.

15. If Respondent fails to comply with any of the terms contained herein, the Respondent acknowledges and agrees that the Board may take disciplinary action against her pursuant to N.C. Gen. Stat. § 90-270.60 (2017).

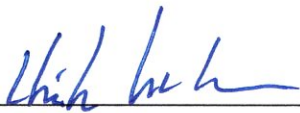
16. The Respondent acknowledges that, prior to signing this Consent Order she has been provided with legal advice concerning every aspect of this Consent Order from an attorney of her own choosing, or, in the alternative, that she had every opportunity to obtain such legal advice and that she knowingly and voluntarily elected not to seek legal advice.

17. The Respondent acknowledges and agrees that she has entered into and signed this Consent Order voluntarily and without coercion or duress of any type.

18. The Respondent acknowledges and agrees that this Consent Order shall become legally effective on the date it is signed and dated by the Board's Chairperson.

See Exhibit 1 to this Consent Order, attached hereto.

THE NORTH CAROLINA MARRIAGE AND
FAMILY THERAPY LICENSURE BOARD:

By: 
Christopher Rodriguez
Its Chairperson

THE RESPONDENT:


Faith Dulin


Shannon Warf Wilson
Attorney for the Respondent

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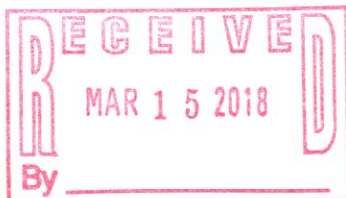


EXHIBIT 1
(Attached)

North Carolina Marriage and Family Therapy Licensure Board

Supervisee Evaluation Form

Supervisee (print name) _____

Supervisor (print name) _____

Reporting Period State Date _____ Reporting Period End Date _____

This evaluation is based upon the findings of the Board relative to specific complaints regarding Standards III, VI, and IX of the AAMFT Code of Ethics.

EVALUATION

What theory base(s) or therapy approach/model (s) underlies the supervisee's practice?

Do or will you routinely discuss the above with emphasis on the AAMFT Code of Ethics?

____ Yes ____ No

Please rate the following on scale of 0 – 10 (0 = not able to observe; 1 = Major Weakness; 5 = Acceptable Performance, but still needs improvement, 10 = Exemplary)

1. Ability of learner to prepare for and use supervision; recognizes role of learner; reflects on and generalizes learning from one experience to another; profitably uses supervisor feedback

____ (0) Not able to observe

____ (1-2) Accepts supervision only when forced; generally unhappy with receiving supervision and unwilling to participate

____ (3-4) Attends scheduled meetings, but is reluctant to go in-depth into issues relevant to supervision

____ (5-6) Prepares for and initiates scheduled meetings. Performance indicates use of supervisory exchange

____ (7-8) Consistently prepared for supervision; work indicates maximum use of supervision

____ (9-10) Able to present thoughtful, detailed analysis of options to supervisor; realistic in acknowledging issues

2. Demonstrates commitment to MFT profession and ethical standards

- _____ (0) Not able to observe
- _____ (1-2) Violates ethical standards
- _____ (3-4) Usually does not violate ethical standards
- _____ (5-6) Acts ethically
- _____ (7-8) consistently acts ethically, very good knowledge of ethical standards
- _____ (9-10) Strong adherence to and promotion of professional ethics

3. Self-Evaluation

- _____ (0) Not able to observe
- _____ (1-2) Does not demonstrate ability or willingness to evaluate self, rarely acknowledges the need to self-evaluate, rarely takes responsibility for own behaviors, feelings, decisions, and beliefs
- _____ (3-4) Limited awareness of, and/or sense of responsibility for own behaviors, feelings, decisions and beliefs
- _____ (5-6) Acceptable level of self-awareness, self-responsibility, and flexibility
- _____ (7-8) consistently demonstrates self-awareness and responsibility for own behaviors, feelings, decisions and beliefs
- _____ (9-10) Demonstrates ongoing self-evaluation, self-responsibility, and adaptation of self to promote positive outcome

4. Professional Relationships: Demonstrates ability to establish effective professional relationships with clients; promotes conditions fostering trust in a therapist-client relationship that allows for adhering to ethical boundaries, including understanding of appropriate use of electronic media within the therapist/client relationship

- _____ (0) Not able to observe
- _____ (1-2) Demonstrates difficulties in establishing relationships; allows unproductive, negative situations to develop
- _____ (3-4) Demonstrates ability to relate appropriately and constructively with clients, but occasionally has problems establishing boundaries
- _____ (5-6) Demonstrates the purposeful use of self and client in developing and maintaining appropriate boundaries
- _____ (7-8) Consistently demonstrates sensitivity to issues that can develop in the therapist-client relationship that could create boundary issues
- _____ (9-10) Demonstrates strong awareness of and consistently maintains appropriate therapist-client boundaries

5. Communication Skills: Demonstrates ability to communicate with and work cooperatively with other professionals, supervisors, and larger systems

- _____ (0) Not able to evaluate
- _____ (1-2) Communication is disorganized, vague, general and irrelevant
- _____ (3-4) Expresses self well
- _____ (5-6) Ability to organize and concisely incorporate relevant information in discussions
- _____ (7-8) Above average ability to express self consistently in an organized manner with concise, relevant information
- _____ (9-10) Excellent ability to express self consistently in an organized manner, both orally and written

6. Does the supervisee understand North Carolina Statutes and Codes regarding regulation of the practice of marriage and family therapy?

_____ (0) Not able to evaluate

_____ (1-2) Significant gaps in understanding are evident

_____ (3-4) Basic understanding but needs improvement

_____ (5-6) Average understanding, knows some of the statutes and codes but not comprehensively

_____ (7-8) Above average ability to understand and articulate the statutes and codes

_____ (9-10) Excellent ability to express the statutes and codes

Evaluate the strengths and weaknesses of the supervisee at the present time:
(attach additional page if necessary)

Do you have any concerns about the licensee's competency to practice at an acceptable standard with regards to the MFT profession?

Additional Comments: *(attach additional page if necessary)*

_____ Yes, I have provided the supervisee with a copy of this evaluation.

Supervisor signature _____

Phone: _____ E-Mail: _____

Return to:

NC Marriage and Family Therapy Licensure Board
201 Shannon Oaks Circle, Suite 200
Cary, NC 27511
Fax: 919-336-5156
Email: ncmftlb@nc.rr.com