

**MEETING MINUTES  
TENNESSEE BOARD FOR LICENSED PROFESSIONAL COUNSELORS,  
MARITAL AND FAMILY THERAPISTS, AND  
CLINICAL PASTORAL THERAPISTS MINUTES**

**DATE:** June 2, 2017  
**TIME:** 9:00 a.m.  
**LOCATION:** Health Related Boards Conference Center  
Poplar Room, 665 Mainstream Drive  
Nashville, TN 37243

**BOARD MEMBERS**

**PRESENT:** Susan Hammonds-White, Ed.D. LPC, Chair  
Kimberly Speakman, LPC  
Jennifer Little, Citizen Member

**BOARD MEMBERS**

**ABSENT:** Bradley Bull, MFT  
Howard Nelson, CPT

**STAFF PRESENT:** Teddy Wilkins, Unit Director  
Vanessa Hayes, Board Administrator  
Todd Pinckley, Advisory Attorney

Dr. Hammonds-White called the meeting to order at 9:05. A roll call was conducted and a quorum was present.

**Minutes**

Upon review of the March 3, 2017 minutes, Dr. Hammonds-White made a motion, seconded by Ms. Speakman, to approve the minutes as written. All in favor. The motion carried.

**Financial Report**

Ms. Noranda French reviewed the Financial Report stating that as of December 31, 2016 the salary and wages expenditure was \$18,644.53; employee benefits were 4,151.98; travel was 1,059.38; communications were 1,667.85; professional services and dues were 1,743.77; and state professional services were at 1,848.36. The total direct mid-year point expenditures are \$29,115.87.

## **Legislative Report**

Ms. Lacey Blair, Legislative Liaison, presented the Legislative report. She first discussed Public Chapter 396, named the “Kenneth and Madge Tullis, MD, Suicide Prevention Training Act.” This legislation requires the professionals licensed under several occupational boards, including the board for professional counselors, marital and family therapists, and clinical pastoral therapists to complete a suicide prevention training program that is approved by rule by the respective board. Beginning January 1, 2020, this training must be completed once every five years and before initial licensure for those applying for initial licensure on or after that date. Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) must develop a model list of training programs that cover suicide prevention, assessment, screening, treatment, management, and post vention. The licensing board may approve a program that excludes one of these elements if the element is inappropriate for the profession in question. The hours spent in the training program shall count towards meeting any continuing education requirements and the Board may promulgate rules to effectuate the purposes of this act. This act took effect on May 18, 2017.

The next chapter discussed was Public Chapter 350. Ms. Blair reported that this will allow healthcare providers to satisfy one hour of continuing education requirements through the performance of one hour of voluntary provision of healthcare services. The maximum amount of annual hours of continuing education that a provider can receive through providing volunteer healthcare services is the lesser of 8 hours or 20% of the provider’s annual continuing education requirement. The legislations allows for rulemaking by the division of health related boards in order to administer this section. This took effect on May 12, 2017.

The next chapter is Public Chapter 215. This will require state governmental entities that establish or adopt guides to practice to do so through the promulgation of rules, rather than policy. The rules so promulgated must specify all provisions included in and relating to the guide to practice. Any changes to guides to practice made after the guides are adopted must also be promulgated by rule in order to be effective. For purposes of this part, guides to practice includes codes of ethics and other quality standards, but does not include tests, examinations, building codes, safety codes, or drug standards. This legislation took effect on April 28, 2017.

The next chapter discussed was Public Chapter 240. This legislation was brought by the Department of Health and was designed to address a number of issues throughout all licensing boards, committees, and councils. This legislation will:

- Insure the integrity of licensure examinations by making examination questions, answer sheets, scoring keys, and other examination data confidential and closed to public inspection.
- Allow the issuance of limited licenses to applicants who have been out of clinical practice or inactive, or who are engaged in administrative practice. Limited licenses may be of

restricted scope, restricted duration, and have additional conditions placed upon them in order to obtain full licensure.

- Clarify that other documents prepared by or on behalf of the Department with regard to an investigation are confidential until such time as formal disciplinary charges are filed against the provider.
- Eliminate the “locality rule” for administrative law and require the chief administrative official for each health care facility to report within 60 days any disciplinary action taken against an employee for matters related to ethics, incompetence or negligence, moral turpitude, or substance abuse, to the employee’s respective licensing board. All records pertaining to the disciplinary action shall be made available for examination to the licensing board.

This act became effective on May 2, 2017.

The next chapter discussed was Public Chapter 481. In this chapter the legislation has created a new violation of a healthcare practitioner’s practice act if that practitioner refuses to submit to or tests positive for any drug the practitioner does not have a lawful prescription for or a valid medical reason for using the drug. It is the duty of the employer to report any violation to the Department of Health. If the practitioner fails a drug test, the practitioner has 3 business days to either produce the requisite prescription or medical reason, or report to their board approved peer assistance program. If the practitioner does not comply with any of these measures, it is the duty of the employer to report this violation of the practice act to the employee’s licensing board for investigation and action. If the practitioner reports to the peer assistance program and obtains and maintains advocacy of the program, the employer is not required to notify the board.

As long as a practitioner obtains, maintains and complies with the terms of a peer assistance program, the board shall not take action on the licensee for the sole reason of a failed or refused drug test. If a practitioner fails to obtain or maintain advocacy from the peer assistance program, the program is required to report that information to the appropriate licensing board. The board SHALL suspend the license of a practitioner who fails to comply with the terms of the program. Employer drug testing must be compliant with the Drug-free Workplace requirements. This legislation allows a quality improvement committee to share information regarding substance abuse by a practitioner with other quality improvement committees. Additionally, this legislation specifies that the Department of Health is not required to obtain prior approval from the Attorney General in order to take any emergency action on a licensee. This took effect on July 1, 2017.

Ms. Blair reported that in Public Chapter 413, as enacted, this legislation allows Non-Governmental Organization’s (NGO) approved by Tennessee Department of Health (TDH) to establish and operate needle and hypodermic syringe exchange programs. The needles and syringes must be provided at no cost and in sufficient quantity to ensure they are not shared or reused. There is no one-to-one exchange requirement. The programs must provide educational materials on the prevention of HIV and AIDS, prevention of drug abuse and overdose, and the

treatment of mental illness and substance abuse, including referrals. The programs must also provide access to naloxone or a referral to a program that provides naloxone.

The law provides for limited civil immunity and criminal immunity from drug paraphernalia charges. Finally, the law requires the programs to report certain program information to TDH and allows for TDH to promulgate rules to effectuate the purposes of this act. This act took effect on May 18, 2017.

Ms. Blair also reported on Public Chapter 230 and Public Chapter 18. In Public Chapter 230, the legislation authorizes commissioners or supervising officials of departments to evaluate certain actions by a regulatory board to determine whether the action may constitute a potentially unreasonable restraint of trade. Supervising officials must ensure that the actions of regulatory boards that displace competition are consistent with a clearly articulated state policy. If a board action constitutes a potentially unreasonable restraint of free trade, the supervising official must conduct a further review of the action and either approve, remand or veto the action. The supervising official may not be licensed by, participate in, or have a financial interest in the occupation, business or trade regulated by the board who is subject to further review, nor be a voting or ex official member of the board. The supervising official must provide written notice of any vetoed actions to the senate and house government operations committees.

Prior to filing a regulatory board's rule with the secretary of state, the commissioner or chief executive officer of the administrative department under which a regulatory board operates or to which a regulatory board is administratively attached, or a designee to the extent a conflict of interest may exist with respect to the commissioner or chief executive officer, must remand a rule that may constitute a potentially unreasonable restraint of trade to the regulatory board for additional information, further proceedings, or modification, if the rule is not consistent with a clearly articulated state policy or law established by the general assembly with respect to the regulatory board. This act took effect on April 24, 2017.

In Chapter 18 the legislation authorizes a school counselor to refer, or help facilitate a referral, of a student to a counselor or therapist for mental health assessments or services. This took effect on July 1, 2017.

### **Office of General Counsel Report**

Mr. Pinckley stated as of May 30, 2017, the Office of General Counsel has cases against (1) licensee. There are no cases set for consent orders or for a hearing. There are no policy statements or rule changes for the Boards review. Mr. Pinckley stated that the Telehealth Rules are ready, but Dr. Nelson and Dr. Bull are not present and he would like to get their input as well. Mr. Pinckley stated that he will email the rules to the Board members for them to review over the next few months, and get the Boards feedback, and have something to ready to go for the next meeting.

## **Office of Investigations Report**

Ms. Dorroh stated there is one (1) open complaint against CMFT's and one (1) open complaint against LMFT's, and eighteen (18) complaints against LPC's. The last review was in April and nine (9) complaints were closed. They are in the process of scheduling another review for the open complaints.

## **Administrative Report**

Ms. Hayes reviewed the Administrative Report stating there are two thousand ninety (2090) active Licensed Professional Counselors, of those, one thousand eight hundred five (1805) have the Mental Health Service Provider designation and three hundred twenty-nine (329) are approved supervisors. There are currently one hundred fifty-eight (158) temporary LPC/MHSP licenses. Ms. Hayes said there are twenty-five (25) Licensed Clinical Pastoral Therapists. There are five hundred eighty-seven (587) Licensed Marital and Family Therapists and one hundred thirty-three (133) temporary MFT licensees. Ms. Hayes stated that of the 210 LPC's who renewed their licenses since the March 3, 2017 board meeting, 65% renewed on-line. Ms. Hayes stated that of the (75) LMFT's who renewed their licenses since March 3, 2017 71% renewed on-line.

Remaining Board meeting dates for 2017 have been scheduled for:

September 1, 2017

December 1, 2017

## **Newly Licensed**

Ms. Speakman made a motion, seconded by Ms. Little, to approve the following newly Licensed Professional Counselors:

**Lauren D. Bean**  
**Shara D. Biggs**  
**Kelly M. Brahy**  
**Christina A. Call Christensen**  
**John B. Davis**  
**Crystal L. Fondren**  
**Fredrick Gillam, Jr.**  
**Emily M. Hastings**  
**Kelly A. Hodge**  
**Emily L. Humerick**  
**Nina E. Ingram**  
**Jacqueline M. Johnson**  
**Marlon C. Johnson**  
**Emma Judd**

**Hilary N. Meier**  
**Cynthia A. Miller**  
**Kendrah Nason**  
**Christine Larkin Oates**  
**Megan C. Pathammavong**  
**Claudia Perez**  
**Ladona Pierce**  
**Jessica R. Reed**  
**Meredith J. Sachs**  
**Leah White Shanks**  
**Rachel E. Steele**  
**Irena Tepavcevic Tatum**  
**Benjamin K. Taylor**  
**Juliet N. Thomas**

**Jordan D. Keller  
Ryan R. Kite  
Toni D. Louis  
Lauren N. Martin  
Shanta N. Wilson**

**Carolyn Wadman  
Susan Whitley  
Biancia C. Williams  
Patricia “Lynn” Wilson  
Leeanna Noe Woods**

The motion carried.

Ms. Little made a motion, seconded by Ms. Speakman, to approve the following newly Licensed Marital and Family Therapists:

**Kaylyn F. Chappell  
Kay Carter Free  
Lacey Gartley  
Craig P. Honbarger  
Eleah M. Hyatt  
Cassanora C. Lampley**

**Karen V. McCrory  
Lorrie Slater  
Janet Velazquez  
Rebecca Walker  
Lindsay W. Wilburn**

The motion carried.

### **Temporary Licenses**

Ms. Speakman made a motion, seconded by Ms. Little, to approve the following Temporarily Licensed Professional Counselors:

**Sharehan S. Ayesh  
Allison L. Battles  
Adrian Bennett  
Laura F. Boggan  
John R. Bower  
Cindy L. Cole  
Rebecca Frary  
Tina Goode  
Adam A. Heckmann  
Daniel P. Hutcheson  
Melissa Johnson  
Jane Joyce  
Jenna L. Kaufman  
Charnequa J. Kennedy  
Natalie L. Lequang**

**Angela M. Lomax  
Tammy C. McCoy  
Candice R. Milligan  
Chandra C. Moma  
Shawn M. Raley  
Jessica T. Rasley  
Julia Gates Rhea  
Jillian M. Richardson  
Sharon D. Richardson  
Vincent J. Ruzzo  
Alexandria M. Sheucraft  
Whitney E. Thacker  
Nathan B. West  
Charles E. Winton  
Shawn Winton**

Ms. Little made a motion, seconded by Ms. Speakman, to approve the following Temporarily Licensed Marital and Family Therapists:

**Lucinda P. Black  
Layla J. Bonner  
Luke T. Brasel  
Elizabeth Burke  
Abby K. Butler  
Amy E. Coxwell  
Katlyn Day  
Robert A. Dunn  
Miller M. Folk  
Sarah E. Grove  
Cresson A. Haugland**

**Dixie R. Heiss  
David Jaeger  
Brooke Lamb  
Sandra E. Miramontes  
Mimi Mungomba  
Helen K. Newton  
Kaitlyn Nicholson  
Amara L. Rickman  
Tonya Robbins  
Emily Runyan Sullivan  
Barbara Tamkin  
Sandra Dee Taylor**

The motion carried.

### **Reinstatement Applications**

Ms. Little made a motion, seconded by Ms. Speakman to approve the following reinstated Licensed Professional Counselors:

**Rochelle A. Butler  
Ruth Cohen  
Anna Edgeston  
Amanda Russell  
Sherry L. Semrau  
Amy L. Skinner  
Bobby Coates**

The motion carried.

Ms. Speakman made a motion, seconded by Ms. Little to approve the following reinstated Marital & Family Therapists:

**James O. Anderson  
Richard Barbee**

Ms. Little made a motion, seconded by Ms. Speakman, to approve the following reinstated Clinical Pastoral Therapist:

**Christopher O'Rear**

The motion carried

### **File Review**

The Board reviewed a file for **Mr. Bobby Coates** who is attempting to reinstate his LPC license. His file was reviewed at the last board meeting. He was requested to appear before the Board at this meeting and he is in attendance. Mr. Pinckley stated that there were a few issues with the discussion at the last meeting. Mr. Pinckley stated that we inadvertently left out the allied papers and those are a companion with the consent order and need to be read at the same time. Also, it was stated that his license had been suspended. It was not suspended. His right to renew was suspended pending an evaluation. In the 1990's Mr. Coates was investigated by the Tennessee Department of Health and there was no cause found that he had violated any Tennessee Statue, Rule, or Authority. Mr. Coates stated that the investigation in the Commonwealth of Virginia resulted in the termination of 2 investigators who committed fraud against him and a lawsuit against twenty eight (28) individuals on his behalf as the plaintiff for fraud and slander. Mr. Coates has had the requested Psychiatric evaluation and presented the letter from the Psychiatrist. After reviewing the letter, and speaking with Mr. Coates, Ms. Speakman made a motion to reinstate Mr. Coates LPC license, seconded by Ms. Little. All in favor. Motion carried.

### **Correspondence**

The Board reviewed correspondence from **Ms. Carla Babb** requesting approval from the Board to be able to present training for CEU's that would be given 1 – 2 times a month throughout the year. Ms. Speakman made a motion to approve her request, seconded by Ms. Little. All in favor. The motion carried.

Unless there is a substantial change Ms. Babb will not need to come back in front of the Board. There needs to be a statement on the CEU that this was approved by the Board on June 2, 2017.

Correspondence was reviewed from **Ms. Mandy Sutton** requesting approval to continue seeing clients in her own private practice while under supervision. She is not part of an agency and there is no clinical supervisor on site. The Board recommended that she will need to apply for a temporary license and obtain a supervisor. She will not be able to continue her own private practice. She will need to find someone with their own private practice that meets the definition of clinical setting. If she can meet these requirements she can continue to serve the elderly population. Half of her supervision hours must come from a LPC/MHSP as per the rules. Once she gets the temporary license she can use the title LPC/MHSP temp.

The Board reviewed correspondence from **Ms. Channing Phillips** requesting to continue her supervision by tele-supervision. The Supervision must be on a HIPAA compliant video conferencing. A motion was made by Ms. Little to approve this request, seconded by Ms. Speakman. All in favor. Motion carried

The Board reviewed correspondence from **Ms. Johnna Kitts and Ms. Faith Bowling** requesting tele-supervision from **Ms. Raquel Nichols**, who also sent letters on their behalf. The Board stated that the Supervision must be on a HIPAA compliant video conferencing such as, but not limited to VSEE. A motion was made by Ms. Speakman to approve this request, seconded by Ms. Little. All in favor. The motion carried.

The Board reviewed correspondence from **Ms. Jessica Rasley** for approval to be able to do her supervision by tele-supervision. The Supervision must be on a HIPAA compliant video

conferencing. A motion was made by Ms. Little to approve this request, seconded by Ms. Speakman. All in favor. Motion carried

The Board reviewed correspondence from **Mr. Nathan West** requesting a 1.5 to two (2) years extension of the four (4) year window to complete supervision. The Board decided to grant a one (1) year extension. A motion was made by Ms. Speakman to approve a one (1) extension, seconded by Ms. Little. All in favor. Motion carried.

A request from **Ms. Jodi Long** from the **NBCC** was discussed. She is requesting permission to use the emails from testing to do a survey with the licensees for new testing questions. A motion was made by Ms. Speakman to approve the request, seconded by Ms. Little. All in favor. Motion carried.

### **Discuss Other Board Business**

The Board would like to be able to send Ms. Speakman, Dr. Hammonds-White, and Ms. Wilkins to the NBCC meeting in North Carolina in August. Ms. Speakman make a motion to approve, seconded by Ms. Little. All in favor. The motion carried.

### **Adjourn**

With no other Board business to conduct the Board adjourned at 11:35 pm Ms. Speakman made a motion to adjourn, seconded by Ms. Little. The motion carried.