

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

3 **In the Matter of:**

4 **Christine C. Carrillo, LPC-21582,**  
5 **Licensed Professional Counselor,**  
6 **In the State of Arizona.**

7 **RESPONDENT**

**CASE NO. 2023-0160**  
**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), Christine C. Carrillo (“Respondent”) and the Board enter into this  
12 Consent Agreement, Findings of Fact, Conclusions of Law and Order (“Consent Agreement”) as  
13 a final 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 and the lifting of the stay of suspension.

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-21582 for the practice of  
15 counseling in the State of Arizona.

16 2. From 06/21 – 03/22, Respondent provided IOP behavioral health services to  
17 Complainant at Agency 1.

18 3. During the course of treatment at Agency 1, Complainant had disclosed suicidal  
19 ideation during sessions.

20 4. A 10/01/21, 10/28/21, and 12/02/21 progress note included Complainant reported  
21 suicidal ideation.

22 5. At least three progress note documented Complainant having suicidal ideation,  
23 yet Respondent failed to develop any sort of safety plan or complete a risk assessment to  
24 assess Complainant's suicidality.

25 6. Respondent represented the following regarding Complainant's suicidal ideation:

- 1 a. Complainant's statements were passive and attention-seeking, and  
2 everything was followed up on.
- 3 b. Licensee does not recall completing a safety plan or risk assessment.
- 4 c. Complainant did not express a plan or intent.
- 5 d. Respondent contributed Complainant's suicidal ideation to Complainant's  
6 histrionic borderline tendencies.

7 7. Shortly after Complainant's graduation from Agency 1's IOP, Respondent and  
8 Complainant engaged in electronic communication outside of the therapeutic setting.

9 8. The electronic communication between Respondent and Complainant included  
10 the following in part:

- 11 a. Undated screenshots showing Respondent and Complainant were Facebook  
12 friends and that Respondent followed Complainant on Instagram.
- 13 b. A 03/13/22 email between Complainant and Respondent included the  
14 following:
- 15 • Complainant stated she missed Respondent and thanked Respondent for  
16 letting her follow her on Instagram as it makes it easier for Complainant  
17 emotionally being connected to Respondent.
  - 18 • Respondent responded that she would have not accepting Complainant's  
19 request if she thought it was a boundary crossing.
- 20 c. On 03/13/22, Respondent texted Complainant that she will always hold a  
21 special place in Respondent's heart.
- 22 d. In an April 18<sup>th</sup> text, Respondent told Complainant she was there for her and  
23 called Complainant babe.
- 24 e. A 05/17/22 Facebook post shows Respondent commented "sending love" on  
25 Complainant's post about her birthday.

- 1 f. A 12/01/22 Facebook post by Complainant showing Respondent liked the  
2 photo of Complainant in a bikini.
- 3 g. Additional undated texts show Respondent stating she wishes she could be  
4 more of a support and would be going into private practice in 4-6 months  
5 so they can discuss starting individual therapy again.
- 6 h. A 01/08/23 text message included Respondent asking if Complainant was  
7 okay and Respondent was thinking about Complainant.
- 8 i. In a 02/14/23 email, Complainant stated she thought Respondent loved and  
9 cared about her.
- 10 j. A 02/15/23 text from Respondent to Complainant indicated Respondent was  
11 sorry Complainant was having panic attacks but they both knew it was not a  
12 result of anything Respondent did or said.
- 13 k. 02/17/23 texts show Complainant stating she was really sad and felt like  
14 nothing, and Respondent responds she can only recommend a higher level of  
15 care to Complainant.
- 16 l. Undated texts show Respondent apologizing to Complainant stating she  
17 cares deeply for Complainant and Complainant's well-being.
- 18 m. Undated texts show Respondent stating her and Complainant worked  
19 together for a long time and of course there was going to be human  
20 emotions, but Complainant needs a therapist with stronger boundaries.
- 21 n. Undated texts show Respondent asking if Complainant's therapist reported  
22 Respondent and Respondent hoped Complainant got it cleared up.
- 23 o. Undated text messages show Respondent stating Complainant blurred the  
24 lines of their relationship and Respondent has all the texts and emails  
25 showing Complainant's inappropriate behaviors and borderline tendencies.

1           9.       Despite a 02/25/22 progress note completed by Respondent at Agency 1  
2 documenting that Complainant had grown very attached to Respondent, Respondent failed to  
3 set boundaries with Complainant at the conclusion of services at Agency 1 and engaged in non-  
4 therapeutic conversations with Complainant for several months.

5           10.      After Complainant's discharge from Agency 1, Respondent almost immediately  
6 began having contact with Complainant outside of the therapy setting and failed to document  
7 anywhere her ethical decision-making model or rationale for continuing contact with  
8 Complainant.

9           11.      Respondent begins telling Complainant she would be going into private practice  
10 and could start services again with Complainant, showing that Respondent was aware  
11 Complainant was in need of behavioral health services.

12          12.      Some of the texts Respondent sends have undertones of blame-shifting, as if to  
13 blame Complainant and put various responsibilities on Complainant.

14          13.      This is evidenced by the texts when Respondent states the panic attacks  
15 Complainant was experiencing was not a result of what Respondent did and another text where  
16 Respondent tells Complainant she needs to clear things up regarding whether her therapist  
17 reported Respondent.

18          14.      Respondent was aware of the attachment Complainant had towards  
19 Respondent, yet Respondent chose to engage in texting, emailing, and social media contact  
20 following the termination of Complainant's services at Agency 1.

21          15.      From 01/23 – 02/23 – Respondent provided behavioral health services to  
22 Complainant at Agency 2.

23          16.      At the onset of these services, Respondent failed to document anywhere within  
24 the clinical records her prior therapeutic and non-therapeutic relationship with Complainant, and  
25 how Respondent would be able to remain objective in Complainant's treatment.

1 17. Respondent chose to initiate services again with Complainant even after  
2 Complainant expressed her attachment and love for Respondent.

3 18. Respondent acknowledged not establishing clear boundaries with Complainant  
4 upon termination of services at Agency 1 and agrees it is not appropriate to converse with a  
5 client following the termination of services because it could create co-dependency.

6 19. On 01/28/23, Respondent completed a treatment plan with Complainant at  
7 Agency 2 which indicated the estimated completion of treatment would be three months and  
8 treatment frequency would be every two weeks.

9 20. Respondent in turns has one session with Complainant on 02/11/23 where the  
10 note indicates they reviewed DBT and will create a trauma timeline to pick up targets for neuro-  
11 processing.

12 21. On 02/11/23, Respondent enters a note indicating Respondent and Complainant  
13 will terminate treatment due to safety concerns pertaining to the therapeutic alliance.

14 22. A 02/27/23 contact note indicated Respondent and Complainant discussed the  
15 termination of services based on Complainant's inability to maintain confidentiality and adhere  
16 to HIPAA.

17 23. A 02/18/23 termination note indicate services were discontinued due to a mutual  
18 decision since Complainant was sharing information with her mother and the mother reached  
19 out to Respondent leaving threatening messages.

20 24. Respondent represented the following regarding the termination of services at  
21 Agency 2:

22 a. When Complainant came in for the intake, Respondent became aware of  
23 other factors and indicated Complainant would need a higher level of care.

24 b. Complainant asked to be discharged from services but then took it back, so  
25 then Respondent terminated services.

1 c. In the final session together, they discussed what the termination would look  
2 like but Complainant wanted to stay in services.

3 d. After the termination of services Respondent had contact with Complainant  
4 and was informed Complainant had another therapist but Respondent failed  
5 to document this within the clinical record.

6 25. Nowhere within the clinical record does it indicate Respondent took any steps to  
7 ensure continuity of care for Complainant.

8 26. Despite Respondent documenting there was a conversation around the  
9 termination of services, Respondent acknowledged that Complainant wanted to remain in  
10 services yet Respondent terminated the therapeutic service anyway.

11 27. The informed consent Complainant signed at Agency 1 failed to include the  
12 following minimum Board requirements:

13 a. General procedures to be used in treatment, including benefits, limitations,  
14 and potential risk.

15 b. The client's right to be advised of the consequences of refusal and  
16 withdrawal.

17 c. The licensee's refund and collection policies and procedures.

18 28. The progress notes at Agency 1 failed to include the minimum telehealth  
19 requirements:

20 a. Mode of session, whether interactive audio, video, or electronic  
21 communication.

22 b. Verification of the client's physical location during the session; and local  
23 emergency contacts.

24 29. The informed consent Complainant signed at Agency 2 failed to include the  
25 following minimum Board requirements:



- a. The licensee's refund and collection policies and procedures.
- b. Manner of identifying the client when using electronic communication that does not involve video.
- c. Despite there being a space for the date the client signed the informed consent, it is left blank.

30. The 01/28/23 treatment plan completed at Agency 2 for Complainant failed to include the following minimum Board requirements:

- a. The date the treatment plan will be reviewed.
- b. The dated signature of the client nor is there a space for it.

31. In 2020 and 2022, Respondent submitted her LAC renewal applications with the Board where she was required to complete the Arizona Statutes/Regulations Tutorial which provides education and training on Arizona clinical documentation standards.

### **CONCLUSIONS OF LAW**

1. 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 ACA Code of Ethics:

#### **A.6.E, Nonprofessional Interactions or Relationships (Other than Sexual or Romantic Interactions or Relationships)**

Counselors avoid entering into nonprofessional relationships with former clients, their romantic partners, or their family members when the interaction is potentially harmful to the client. This applies to both

1 in-person and electronic interactions or relationships.

2 3. The conduct and circumstances described in the Findings of Fact constitute a  
3 violation of A.R.S. § 32-3251(16)(l), engaging in any conduct, practice or condition that impairs  
4 the ability of the licensee to safely and competently practice the licensee's profession.

5 4. The conduct and circumstances described in the Findings of Fact constitute a  
6 violation of A.R.S. § 32-3251(16)(s), terminating behavioral health services to a client without  
7 making an appropriate referral for continuation of care for the client if continuing behavioral  
8 health services are indicated.

9 5. The conduct and circumstances described in the Findings of Fact constitute a  
10 violation of A.R.S. § 32-3251(16)(p), failing to conform to minimum practice standards as  
11 developed by the board, as it relates to the following:

12 A.A.C. R4-6-1101. Consent for Treatment

13 A.A.C. R4-6-1102. Treatment Plan

14 A.A.C. R4-6-1106. Telepractice

15 **ORDER**

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

18 **Stayed Suspension**

19 1. As of the effective date of this Consent Agreement, Respondent's license, LPC-  
20 21582, shall be **SUSPENDED** for 24 months. However, the suspension shall be stayed and  
21 Respondent's license shall be placed on probation.

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

25 ...

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

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

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

13           6.       Respondent's license, LPC-21582, will be placed on probation for 24 months,  
14 effective from the date of entry as signed below.

15           7.       Respondent shall not practice under their license, LPC-21582, unless they are  
16 fully compliant with all terms and conditions in this Consent Agreement. If, for any reason,  
17 Respondent is unable to comply with the terms and conditions of this Consent Agreement, they  
18 shall immediately notify the Board in writing and shall not practice under their license until they  
19 submit a written request to the Board to re-commence compliance with this Consent  
20 Agreement. All such requests shall be pre-approved by the Board Chair or designee.

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

25 ...

**Continuing Education**

1  
2           9.       In addition to the continuing education requirements of A.R.S. § 32-3273, within  
3 12 months of the effective date of this Consent Agreement, Respondent shall complete 6 clock  
4 hours of continuing education addressing current Arizona documentation standards. All required  
5 continuing education shall be pre-approved by the Board Chair or designee. Upon completion,  
6 Respondent shall submit a certificate of completion of the required continuing education.

7           10.       In addition to the continuing education requirements of A.R.S. § 32-3273, within  
8 12 months of the effective date of this Consent Agreement, Respondent shall take and pass a  
9 three-semester credit hour graduate level behavioral health ethics course from a regionally  
10 accredited college or university, pre-approved by the Board Chair or designee. Upon  
11 completion, Respondent shall submit to the Board an official transcript establishing completion  
12 of the required course.

13           11.       In addition to the continuing education requirements of A.R.S. § 32-3273, within  
14 12 months of the effective date of this Consent Agreement, Respondent shall complete 6 clock  
15 hours of continuing education addressing risk assessment. All required continuing education  
16 shall be pre-approved by the Board Chair or designee. Upon completion, Respondent shall  
17 submit a certificate of completion of the required continuing education

18           12.       In addition to the continuing education requirements of A.R.S. § 32-3273, within  
19 12 months of the effective date of this Consent Agreement, Respondent shall complete 3 clock  
20 hours of continuing education addressing continuity of care. All required continuing education  
21 shall be pre-approved by the Board Chair or designee. Upon completion, Respondent shall  
22 submit a certificate of completion of the required continuing education

23           13.       In addition to the continuing education requirements of A.R.S. § 32-3273, within  
24 12 months of the effective date of this Consent Agreement, Respondent shall complete 10 clock  
25 hours in attendance of two separate Board meetings.

1 **Clinical Supervision**

2 14. While on probation, Respondent shall submit to clinical supervision for 24 months  
3 by a masters or higher level behavioral health professional licensed by the Arizona Board of  
4 Behavioral Health Examiners at the independent level. Within 30 days of the date of this  
5 Consent Agreement, Respondent shall submit the name of a clinical supervisor for pre-approval  
6 by the Board Chair or designee. Also within 30 days of the date of this Consent Agreement, the  
7 clinical supervisor shall submit a letter disclosing their prior relationship to Respondent. In that  
8 letter, the clinical supervisor must address why they should be approved, acknowledge that they  
9 have reviewed the Consent Agreement and include the results of an initial assessment and a  
10 supervision plan regarding the proposed supervision of Respondent. The letter from the  
11 supervisor shall be submitted to the Board.

12 **Focus and Frequency of Clinical Supervision**

13 15. The focus of the supervision shall relate to, behavioral health ethics, Board  
14 statutes and rules, Arizona documentation, boundaries, dual relationships, clinical care, and risk  
15 assessment. During each supervision session, the supervisor shall review a minimum of 3 client  
16 records chosen at random by the supervisor to ensure Respondent's compliance with current  
17 behavioral health documentation standards in Arizona. Respondent shall meet individually with  
18 the supervisor twice monthly for the first 12 months. The frequency for the remaining 12 months  
19 will be at the recommendation of clinical supervisor, but not less than once monthly.

20 **Reports**

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

- 25 a. Dates of each clinical supervision session.

1 b. A comprehensive description of issues discussed during supervision  
2 sessions.

3 c. The results of each clinical documentation review by the supervisor.

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

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

11 **Change of Clinical Supervisor During Probation**

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

19 **GENERAL PROVISIONS**

20 **Provision of Clinical Supervision**

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

24 ...

25 ...

1 **Civil Penalty**

2 21. Subject to the provisions set forth in paragraph 22, the Board imposes a civil  
3 penalty against the Respondent in the amount of \$1,000.00.

4 22. Respondent's payment of the civil penalty shall be stayed so long as Respondent  
5 remains compliant with the terms of this Consent Agreement. If Board staff determines that  
6 Respondent is noncompliant with the terms of this Consent Agreement in any respect, with the  
7 exception of the tolling provision under paragraph 3, the stay of the civil penalty payment shall  
8 be automatically lifted and payment of the civil penalty shall be made by certified check or  
9 money order payable to the Board within 30 days after being notified in writing of the lifting of  
10 the stay.

11 23. Within 10 days of being notified of the lifting of the stay, Respondent may request  
12 that the matter be reviewed by the Board for the limited purpose of determining whether the  
13 automatic lifting of the stay was supported by clear and convincing evidence. If the Board  
14 receives the written request within 10 days or less of the next regularly scheduled Board  
15 meeting, the request will not be heard at that meeting, but will be heard at the next regularly  
16 scheduled Board meeting. The Board's decision on this matter shall not be subject to further  
17 review.

18 24. The Board reserves the right to take further disciplinary action against  
19 Respondent for noncompliance with this Consent Agreement after affording Respondent notice  
20 and an opportunity to be heard. If a complaint is filed against Respondent for failure to comply  
21 with this Consent Agreement, the Board shall have continuing jurisdiction until the matter is final  
22 and the period of probation shall be extended until the matter is final.

23 25. If Respondent currently sees clients in their own private practice, and obtains any  
24 other type of behavioral health position, either as an employee or independent contractor, where

25 ...

1 they provide behavioral health services to clients of another individual or agency, they shall  
2 comply with requirements set forth in paragraphs 26 through 28 below.

3         26. Within 10 days of the effective date of this Order, if Respondent is working in a  
4 position where Respondent provides any type of behavioral health related services or works in a  
5 setting where any type of behavioral health, health care, or social services are provided,  
6 Respondent shall provide the Board Chair or designee with a signed statement from  
7 Respondent's employer(s) confirming Respondent provided the employer(s) with a copy of this  
8 Consent Agreement. If Respondent does not provide the employer's statement to the Board  
9 within 10 days of the effective date, the Board will provide Respondent's employer(s) with a  
10 copy of the Consent Agreement.

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

21         28. If, during the period of Respondent's probation, Respondent changes  
22 employment, resigns, is involuntarily terminated, resigns in lieu of termination, or goes on  
23 extended leave of absence for whatever reason that may impact their ability to timely comply  
24 with the terms of probation, Respondent shall, within 10 days of the aforementioned acts, inform

25 ...



1 the Board of their change of employment status. After the change and within 10 days of  
2 accepting employment in a position where Respondent provides any type of behavioral health  
3 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 a written  
5 statement providing the contact information of their new employer(s) and a signed statement  
6 from Respondent's new employer(s) confirming Respondent provided the employer(s) with a  
7 copy of this Consent Agreement. If Respondent does not provide the employer's statement to  
8 the Board within 10 days, as required, Respondent's failure to provide the required statement to  
9 the Board shall be deemed a violation of A.R.S. § 32-3251(16)(n) and the Board will provide  
10 Respondent's employer(s) with a copy of the Consent Agreement.

11 29. Respondent shall practice behavioral health using the name under which they  
12 are licensed. If Respondent changes their name, they shall advise the Board of the name  
13 change as prescribed under the Board's regulations and rules.

14 30. Prior to the release of Respondent from probation, Respondent must submit a  
15 written request to the Board for release from the terms of this Consent Agreement at least 30  
16 days prior to the date they would like to have this matter appear before the Board. Respondent  
17 may appear before the Board, either in person or telephonically. Respondent must provide  
18 evidence that they have successfully satisfied all terms and conditions in this Consent  
19 Agreement. The Board has the sole discretion to determine whether all terms and conditions of  
20 this Consent Agreement have been met and whether Respondent has adequately demonstrated  
21 that they have addressed the issues contained in this Consent Agreement. In the event that the  
22 Board determines that any or all terms and conditions of this Consent Agreement have not been  
23 met, the Board may conduct such further proceedings as it determines are appropriate to  
24 address those matters.

25 ...

1 31. Respondent shall bear all costs relating to probation terms required in this  
2 Consent Agreement.

3 32. Respondent shall be responsible for ensuring that all documentation required in  
4 this Consent Agreement is provided to the Board in a timely manner.

5 33. This Consent Agreement shall be effective on the date of entry below.

6 32. This Consent Agreement is conclusive evidence of the matters described herein  
7 and may be considered by the Board in determining appropriate sanctions in the event a  
8 subsequent violation occurs.

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

10 *Christine C. Carrillo* Jan 19, 2024  
Christine C. Carrillo (Jan 19, 2024 10:01 MST)  
11 Christine C. Carrillo Date

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

13  
14 By: *Moli Zavala* Jan 19, 2024  
15 TOBI ZAVALA, Executive Director Date  
Arizona Board of Behavioral Health Examiners

16 **ORIGINAL** of the foregoing filed Jan 19, 2024  
17 with:

18 Arizona Board of Behavioral Health Examiners  
19 1740 West Adams Street, Suite 3600  
Phoenix, AZ 85007

20 **EXECUTED COPY** of the foregoing sent electronically Jan 19, 2024  
21 to:

22 Mona Baskin  
Assistant Attorney General  
23 2005 North Central Avenue  
Phoenix, AZ 85004

24 Christine C. Carrillo  
Address of Record  
25 Respondent

1 Holly Gieszl  
2 3200 N. Central Avenue  
3 Suite 1500  
4 Phoenix, AZ 85012  
5 Attorney for Respondent

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