

IN THE MATTER OF	*	BEFORE THE
LAURENCE SCHEIDLE, PH.D	*	MARYLAND BOARD
RESPONDENT	*	OF EXAMINERS OF
	*	PSYCHOLOGISTS
LICENSE NO.: 01247	*	CASE NO.: 2010- 017
* * * * *		* * * * *

CONSENT ORDER

PROCEDURAL BACKGROUND

On May16, 2011, the Maryland Board of Examiners of Psychologists (the "Board) charged Laurence Scheidle, Ph.D. (the "Respondent") (D.O.B. 11/08/1950), License Number 01247, under the Maryland Psychologists Act (the "Act"), Md. Health Occ. Code Ann. (H.O.) §18-101 *et seq.* (2009 Repl. Vol. & Supp. 2010) and Code Md. Regs. tit. 10, § 36 *et seq.*

The Board charged the Respondent with violating the following provisions under §18-313 of the Act:

Subject to the hearing provisions of §18-315 of this subtitle, the Board, on the affirmative vote of the majority of its members then serving, may deny a license to any applicant, reprimand any licensee, place any licensee on probation, or suspend or revoke a license or any licensee if the applicant or licensee:

- (7) Violates the code of ethics adopted by the Board under §18-311 of this subtitle;
- (17) Commits an act of unprofessional conduct in the practice of psychology;
- (20) Does an act that is inconsistent with generally accepted professional standards in the practice of psychology.

The provisions under Title 10 of the Maryland Code of Regulations corresponding to the Board's charges are as follows:

10.36.05.04. Competence.

B. Impaired Competence.

(2) A psychologist may not:

- (b) Engage in other relationships that could limit the psychologist's objectivity or create a conflict of interest or the appearance of conflict of interest.

10.36.05.07. Client Welfare.

A. A psychologist shall:

- (1) Take appropriate steps to disclose to all involved parties conflicts of interest that arise, with respect to a psychologist's clients, in a manner that is consistent with applicable confidentiality requirements; and

B. Exploitation. A psychologist may not:

- (1) Exploit or harm clients, colleagues, students, research participants, or others;

- (3) Exploit the trust and dependency of clients, students, and subordinates;

- (5) Enter into a new non-psychological, nonprofessional relationship with a former client that is considered exploitative dependent on, but not limited to:

- (a) The nature, duration, and intensity of professional services rendered to the client;

- (b) The length of the professional relationship;

- (c) The length of time between the termination of the professional relationship and the initiation of the nonprofessional relationship;

- (d) The mental stability of the psychologist and former client;

- (e) The circumstances of termination, including, but not limited to, statements or actions of the psychologist suggesting or inviting the possibility of a post-termination relationship; and

(f) The likelihood of adverse impact on the client.

C. Sexual Misconduct. A psychologist may not:

(2) Engage in sexual intimacies with a former client:

(a) For at least 2 years after the cessation or termination of professional services;

(3) Engage in sexual intimacies with individuals known to be the parents, guardians, spouses, domestic partners, sexual partners, children, or siblings of the client or for at least 2 years after the cessation or termination of professional services;

10.36.05.08 Confidentiality and Client Records.

A. A psychologist shall:

(1) Maintain confidentiality regarding information obtained from a client in the course of the psychologist's work;

(3) Safeguard information obtained in clinical or consulting relationships or evaluative data concerning children, students, employees, and others obtained in the course of practice, teaching, research, or other professional services;

C. Recordkeeping. A psychologist shall:

(2) Maintain clinical records of informed consent, presenting problem, diagnosis, fee arrangements, dates and substance of each billed service, original test data with results and other evaluative material, and the results of any formal consultations with other professionals;

BACKGROUND

On August 12, 2011, the Respondent appeared before a Case Resolution Conference committee (the "CRC") of the Board to discuss the pending charges and the potential resolution of the pending charges. Following the CRC, the parties agreed to enter into this Consent Order, consisting of Procedural Background, Findings of Fact, Conclusions of Law and Order, with the terms and

conditions set forth below.

FINDINGS OF FACT

The Board makes the following findings of fact:

I. Respondent's Background

1. At all times relevant to the charges, the Respondent was and is licensed to practice psychology in the State of Maryland.

2. The Respondent initially obtained his license to practice psychology on May 19, 1979. The Respondent's current license will expire on March 31, 2013.

3. Since 1981, the Respondent has maintained an office for the practice of psychology, known as "Scheidle Associates, Inc. ADHD and Childhood Disorders Clinic," specializing in clinical practice with children, individuals, and families, and a "subspecialty" in ADHD ("Attention Deficit Hyperactivity Disorder") evaluation.

4. The Respondent maintains a professional office in a building attached to his home at 1930 Turkey Point Road, North East, Maryland. Previously, the Respondent also maintained a professional office at 260 Gateway Drive, Bel Air, Maryland.

5. At all times relevant to the charges, the Respondent practiced with approximately four professional counselors and a psychiatric nurse.

II. The Complaint

6. On January 4, 2010, the Board received a complaint about the

Respondent from the grandmother of a client of the Respondent, Client A,¹ a minor child.

7. The Complainant alleged, among other things, that:
 - a. She (the grandmother) and Client A's mother, had taken Client A to the Respondent in 2008 for "school issues." Her daughter, the mother of Client A, (hereinafter referred to as "Client B") was also being counseled by the Respondent and/or his wife;
 - b. The Respondent acted in a "highly unprofessional way" because he has "fulfilled multi-faceted roles" in the life of the mother of Client A;
 - c. The Respondent has a recording studio where he is working on recording Client A's mother; and
 - d. The Respondent employs Client A's mother.

8. The Board opened the case for investigation, including interviewing the Respondent, conducting witness interviews, obtaining the Respondent's treatment records, and other relevant documents.

III. Respondent's Evaluation and Treatment of Client A and Client B as Documented in the Respondent's Records

9. On September 17, 2007, the Respondent first saw Client A (D.O.B. fall 1999), at the time a seven (almost eight) year old boy, and his mother, Client B. The Respondent's clinical records contain an unsigned "Clinician's Intake Form," which was completed on September 17, 2007.

10. According to the Complainant, Client B had been treated in the recent past by another psychotherapist at the Respondent's practice.

11. On September 17, 2007, Client B completed a "Parent's Checklist

¹ The names of the Complainant, Respondent's minor client and the client's mother are confidential and are not used in the Consent Order. The Respondent is aware of the identity of the referenced individuals.

of Children's Problems," noting "aggression, breaking things, anger targeted at mother/and grandmother after he visits father." Client B also completed the "DuPaul Home Situations Questionnaire," "ADHD Rating Scale, by Barkley & DuPaul," a "Behavior Rating Form (DSM-IV)," a Diagnostic Symptom Checklist," and a "Mood/Activity Screener."

12. In the Respondent's clinical records is an undated letter to the Respondent, from Client A's father, stating that "per court order you have my permission to evaluate and counsel (Client A)" and further requesting that he receive all evaluations and stating that he does not consent to prescriptions of medication without first being contacted.

13. On September 20, 2007, Client A's grandmother completed the same forms that Client B had completed on the prior visit. In addition, Client A's grandmother completed a "Teacher's Professional Judgment Questionnaire" and a "Teacher's Student Academic Survey." Client A's grandmother home-schooled Client A the previous academic year. As of September 2007, Client A was in second grade.

14. The Respondent's chart contains billing entries regarding Client A on October 2 and 5, 2007. The Respondent's chart does not reflect office visits or client contact on these dates.

15. On October 12, 2007, the Respondent met with Client B. The Respondent's clinical records contain a completed but unsigned form for a parent interview for ADHD. The Respondent obtained family history, academic history, and history of behaviors at home. The Respondent administered the "Kaufman

Brief Intelligence Test” to Client A. The Respondent’s clinical records also contain an unsigned “Gordon Diagnostic System Tests” for impulsivity, sustained attention, and distractibility, which were administered to Client A on October 12, 2007.

16. On October 12, 2007, the Respondent documented notes of an office visit with Client A.

17. On or about October 12, 2007, the Respondent documented notes of an office visit with Client B.

18. On October 12, 2007, the Respondent submitted a “Results of ADHD Evaluation” report to Client A’s pediatrician stating that “[Client A] has a diagnosable condition of Attention Deficit Hyperactivity Disorder, Inattentive Type...” The Respondent noted “problems with school, anxiety, family issues,” for which he recommended “continuation of child therapy for [Client A].” The Respondent made “a recommendation for a trial of a stimulant/non-stimulant medication.”

19. The Respondents chart contains billing entries regarding Client A on October 15 and 18, 2007. The Respondent’s chart does not reflect office visits or client contact on these dates.

20. Thereafter, the Respondent did not have any client contact until June 2008.

21. On June 24, 2008, the Respondent documented a progress note of an office visit with Client B. The Respondent documented that Client A is “not on medication ...seems to have phobias, and ...after sees his father, seems to be

bipolar... threatened to jump out of car.” The Respondent documented that Client B had been diagnosed in February 2008 with Bipolar Disorder and was in counseling and taking psychoactive medication.

22. On June 24, 2008, the Respondent received from Client A’s father’s health insurance company a confirmation of “medical necessity,” pending review of his “health care plan.” The company authorized 10 visits between June 24 and December 24, 2008.

23. On June 27, 2008, the Respondent documented a progress note of an office visit with Client A.

24. The Respondent documented additional office visits with Client A on July 2, 9, 23, August 15 and 29.

25. On September 17, 2008, the Respondent documented interview notes of an office visit with Client B. The Respondent documented that Client B inquired of him whether her son is bi-polar.

26. Thereafter, the Respondent did not have any client contact until January 2009.

27. On January 14, 2009, the Respondent documented notes of an office visit with Client A and Client B. The Respondent noted that Client A has had “problems from people on the bus.”

28. On January 15, 2009, the Respondent prepared a “Uniform Treatment Plan” for Client A, which requested an additional 24 units of service, once bi-weekly.

29. Thereafter, the Respondent did not have any client contact until

March 2009. The Respondent's chart does not contain documentation regarding why Client A did not participate in office visits as requested in the Uniform Treatment Plan.

30. On March 13, 2009, the Respondent documented notes of an office visit with Client A. The Respondent noted that Client A was not taking any medications.

31. After March 13, 2009, the Respondent did not have any further office visits with Client A and/or Client B.

32. The Respondent's chart does not contain a note addressing the cessation of office visits with Client A.

33. According to the Respondent, his initial contact with Client A and Client B in October 2007 was to perform and "an evaluation of [Client A]...for ADD ... due to inattention, difficulties with school, school work not completed, not turned in." The Respondent described his ADD evaluations as a "one shot deal," with testing, observation, and a report.

34. In June 2008, the Respondent's focus was on Client B's concerns about Client A's reaction to visits with his father and being pulled back and forth between his parents. In January 2009, the Respondent resumed seeing Client A regarding problems on the school bus. The Respondent described his contacts with Client A and Client B after the October 2007 ADD evaluation as "multi-episodic consultation."

IV. The Respondent's Business, Social, Personal, and Sexual Relationships with Client B and Respondent's Social and Personal Relationships with Client A

35. The Board investigator interviewed the Respondent on June 15, 2010, who acknowledged having business, social, personal and sexual relationships with Client B and social and personal relationships with Client A after the conclusion of his professional services in 2009.

36. In or about July 2009, Client B, accompanied by an individual acting as her "talent manager," presented to the Respondent's recording studio which was located in a second floor loft area in a portion of Respondent's home. At the time, the recording studio was a hobby in which the Respondent engaged during his personal/non-professional time. The Respondent listened to Client B sing and told her he would "get back to her."

37. In late August or early September 2009, Client B returned to the Respondent's recording studio. The Respondent developed a "two album plan" for recording Client B. The Respondent had been planning on closing his recording studio because the studio had not been active for several years. Respondent stated that recording Client B was expected to give him the impetus to get back into recording.

38. In or about October or November 2009, Client B returned to the recording studio. The Respondent noted that Client B was anxious. The Respondent referred Client B to the Respondent's wife, who is a licensed psychotherapist and shared a clinical practice with the Respondent. Client B saw the Respondent's wife for approximately four or five therapy sessions. During

this time, the Respondent asked his wife whether Client B was making progress.

39. In or about October or November 2009, the Respondent and Client B began to collaborate on song writing.

40. In or about November 2009, on a Friday night at approximately 10:30 p.m., the Respondent and Client B were in the Respondent's recording studio, which was located in Respondent's residence. Client A's grandmother arrived at the Respondent's studio/residence with Client A and a verbal confrontation ensued in Client A's presence. The Respondent demanded that Client A's grandmother leave his property. When the grandmother refused, Respondent "shepherded" her outside. The Respondent told the grandmother, "I know what's been done to Client B. You leave her alone." The Respondent was referring to a history of alleged abuse of Client B.

41. In December 2009, the Respondent employed Client B as an "administrative assistant" to be a receptionist and billing clerk at his professional office. In the Respondent's office, Client B had access to the Respondent's clinical and billing records, including clinical records of her son, Client A.

42. In or about November or December 2009, Client B informed the Respondent's wife that she had been abused by her father as a child. The Respondent learned from his wife that she would be reporting this information to the Department of Social Services.

43. In or about December 2009, the Respondent received a phone call from Client B stating that her father had "attacked her" and was "going to kill her" because she told her parents that she remembered that her father had abused

her. The Respondent advised Client B to call the police. The Respondent assisted Client B in preparing a restraining order.

44. On December 16, 2009, Client B filed in the Circuit Court for Cecil County a "Petition for Protection" from abuse by her father, alleging threatening behavior.

45. On December 16, 2009, Client B was granted a temporary protective order by the Circuit Court for Cecil County prohibiting her father from all contact with her and Client A.

46. On January 6, 2010, Client B filed a Petition to Modify/Rescind Protective Order, which was granted on January 8, 2010.

47. In early 2010, the Respondent began a sexually intimate relationship with Client B.

48. In April 2010, the Respondent moved into Client B's home, but only remained for one weekend. The Respondent continued to have an intimate relationship with Client B after he moved out of her home.

49. On or about April 20, 2010, the Respondent and Client B had an argument while in the Respondent's home regarding Client B questioning the Respondent's loyalty to her. The Respondent removed a gun in the drawer in the bedroom and asked her whether he needed to kill himself to let her know how serious he is about her.

50. On or about April 21, 2010, the Respondent went to Client B's home to retrieve some personal belongings. Client A's grandmother and grandfather (Client B's mother and father) were at Client B's home. They called

the police, allegedly because they thought that the Respondent was coming to kill them.

51. According to a Maryland State Police Incident Report of April 21, 2010, Client B reported to a State trooper that on April 20, 2010, at approximately 2:20 p.m., she was with the Respondent in his office when he pulled a loaded handgun from his desk, pointed at his stomach, and stated he wanted to kill himself. According to the trooper who interviewed the Respondent, the Respondent confirmed Client B's statement. The trooper took the Respondent to an area hospital for a psychiatric evaluation pursuant to a Petition for Emergency Evaluation. The trooper then went to the Respondent's residence and took possession of three firearms, including the revolver with which the Respondent allegedly threatened to kill himself.

52. On April 21, 2010, at 5:00 p.m., the Respondent was seen at an area hospital for a psychiatric evaluation, after which he discharged on his own recognizance, without restrictions at approximately 9:00 p.m.

53. As of June 15, 2010, the date of Respondent's interview by the Board, the Respondent still employed Client B at his professional office, he was still recording Client B in his recording studio, and he was planning to marry Client B and "build a relationship with her son (Client A)."

54. In or about July 2011, the Respondent married Client B.

V. Expert Review

55. During the course of its investigation, the Board submitted the documents obtained during the investigation and transcripts of the interviews that were conducted to a licensed psychologist for an expert review. The expert

reported opinions to the Board that the Respondent failed to meet standards of practice of a licensed psychologist and violated the provisions under the Act for which Respondent was charged.

VI. Summary of Allegations

56. The Respondent's conduct of entering into a personal relationship with Client B, within less than two years after evaluating and treating her son and counseling her, referring Client B to the professional care of his wife, employing Client B as an office assistant, offering music recording services to Client B while Client B was seeing his wife for professional care, and assisting Client B in obtaining a protective order against her father violate H.O. §18-313 for failure to:

- a. Adhere to the ethical and professional standards for the practice of psychology by violating the code of ethics adopted by the Board in violation of H.O. §18-313(7);
- b. Act according to the standards of professional conduct in the practice of psychology in violation of H.O. §18-313(17); and
- c. Act in a manner consistent with generally accepted professional standards in the practice of psychology in violation of H.O. §18-313 (20).

57. The Respondent's conduct violated Md. Code Regs. tit. 10, § 36.05.04B(2)(b) (Impaired Competence) by:

- a. Engaging in a personal and business relationship with Client B that commenced within months of his termination of his evaluation and treatment of her son, Client A, that could limit his objectivity in future;

Engaging in a sexual relationship with Client B that commenced about a year following his termination of his evaluation and treatment of her son, Client A, that could limit his objectivity in future;

- b. Engaging a personal and business relationship with Client B which created a conflict of interest or the appearance of conflict of interest in that the Respondent's wife was providing professional services to Client B; and
- c. Engaging a sexual relationship with Client B which created a conflict of interest or the appearance of conflict of interest in that the Respondent's wife was providing professional services to Client B.

58. The Respondent's conduct violated Md. Code Regs. tit. 10, §

36.05.07 Client Welfare by:

- a. Failing to disclose potential conflicts of interest that could arise as a result of hiring former Client B, the mother of Client A, as an office assistant;
- b. Failing to disclose potential conflicts of interest that could arise as a result of referring Client B, with whom he had a personal relationship, to his wife for therapy;
- c. Potentially exploiting and harming Client A and Client B;
- d. Potentially exploiting the trust and dependence of Client A and Client B;
- e. Entering into a new non-psychological, non-professional relationship with Client B, a former Client and the mother of former Client A, that is considered exploitative, in violation of 10.36.05.07B(5) when he:
 - i. Provided music recording services to Client B, within months of termination;
 - ii. Hired Client B, within months of termination, as an office assistant;
 - iii. Assisted Client B in the preparation of a petition for protective order against her father; and
 - iv. Became sexually intimate with Client B within less than a year of termination of the evaluation and treatment relationship;

- f. Engaging in sexual intimacies with Client B, a former client, less than two years after the cessation or termination of professional services, in violation of 10.36.05.07(C)(2)(a); and
- g. Engaging in sexual intimacies with Client B, the mother of Client A, within less than two years after the cessation or termination of professional services to Client A, her son, in violation of 10.36.05.07(C)(3).

59. The Respondent's conduct violated Md. Code Regs. tit. 10, § 36.05.08A (Confidentiality) by:

- a. Failing to keep client information confidential when he disclosed to Client A's grandmother that he was aware of the history of abuse in the family;
- b. Failing to safeguard client information by allowing Client B to have access to treatment records, including records of his treatment of her son; and
- c. Failing to safeguard client information he received from his wife and used this to prepare court documents on behalf of Client B.

60. The Respondent's conduct violated Md. Code Regs. tit. 10, 36.05.08C(2) (Recordkeeping) for failure to maintain clinical records of informed consent, to document termination of service, and to document the referral of Client B to his wife for therapy.

CONCLUSIONS OF LAW

Based on the foregoing Findings of Fact, the Board concludes as a matter of law that Respondent committed acts in violation of Md. Health Occ. Code Ann. § 18-315(7) (violates the code of ethics), (17) (commits an act of unprofessional conduct), and (20) (does an act that is inconsistent with generally accepted professional standards). Specifically, Respondent violated the Code of Ethics in that he violated Code Md. Regs. tit. 10 § 36.05.04(B)(2)(b) (may not engage in

relationships that could limit objectivity or create conflict of interest); 10 § 36.05.07(A)(1) (shall disclose conflicts of interests); 10 § 36.05.07(B)(1) (may not exploit or harm clients or (3) exploit trust and dependency of clients), or (5) enter in to a nonprofessional relationship with a former client that is considered exploitative; (C) may not engage in sexual intimacies with a former client or engage in sexual intimacies with individuals known to be the parents of the client); 10 § 36.05.08(A) (shall maintain confidentiality and safeguard information obtained) or (C) (shall maintain records of informed consent).

ORDER

Based on the foregoing Findings of Fact and Conclusions of Law, it is this _____ day of October 2011, by a majority of the full-authorized membership of the Board considering this case

ORDERED that Respondent's license shall be **Suspended** for a minimum of **three (3) years** from the date of the Consent Order; and it is further

ORDERED that prior to seeking reinstatement, Respondent shall:

- a. enroll in and shall successfully complete a Board-approved individual tutorial in professional ethics;
- b. The above tutorial shall be in addition to any continuing education requirements mandated for continuing certification. The tutorial shall not count toward fulfilling other continuing education requirements that Respondent must fulfill in order to renew his license to practice psychology;
- c. Respondent shall authorize the Board to provide the ethics tutor with the entire investigative file, including the investigative report, the Board's Charges, and the Consent Order;
- d. Respondent agrees that the ethics tutor will send a final report to the Board regarding Respondent's participation in the tutorial;

- e. Prior to seeking reinstatement, Respondent shall engage in treatment with a Board-approved mental health provider with experience in treating affective disorders and ADHD in adults;
- f. Respondent shall authorize the Board to provide the mental health provider with the entire investigative file, including the investigative report, the prior psychiatric evaluation, the Board's Charges, and the Consent Order; and
- g. Respondent agrees that the mental health provider will send a final report to the Board regarding Respondent's participation in treatment; and it is further

ORDERED that Respondent shall remain on suspension until it is terminated by the Board. After a minimum of three (3) years, Respondent may file a written petition for termination of suspension, but only if Respondent has satisfactorily complied with all pre-conditions of this Consent Order, and if there are no pending complaints regarding Respondent before the Board. Upon reinstatement, the Board, in its discretion may impose a probationary period with conditions, including but not limited to clinical supervision; and be it further

ORDERED that Respondent shall be responsible for all costs associated with fulfilling the terms and pre-conditions of this Consent Order; and be it further

ORDERED that this Consent Order is a public document pursuant to Md. State Govt. Code Ann. § 10-611 *et seq.* (2009 Repl. Vol.)

Dec. 13, 2011
Date


Steven Sobelman, Ph.D.
Chair, MD Board of Examiners of
Psychologists

CONSENT

I, Laurence Scheidle, PhD, acknowledge that I am represented by counsel and have reviewed this Consent Order with my attorney, R. Scott Krause, Esquire, before signing this document.

I am aware that I am entitled to a formal evidentiary hearing before an administrative law judge of the Office of Administrative Hearings. I acknowledge the validity and enforceability of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other procedural and substantive protections to which I am entitled by law. I am waiving those procedural and substantive protections.

I voluntarily enter into and agree to abide by the foregoing Findings of Fact, Conclusions of Law, and Order and agree to abide by the terms and conditions set forth herein as a resolution of the Charges against me. I waive any right to contest the Findings of Fact and Conclusions of Law and I waive my right to a full evidentiary hearing as set forth above, and any right to appeal this Consent Order or any adverse ruling of the Board that might have followed any such hearing.

I acknowledge that if my license is reinstated and I am placed on probation under conditions, by failing to abide by the conditions set forth in a subsequent order, I may be subject to disciplinary actions, which may include revocation of my license to practice psychology.

I sign this Consent Order voluntarily and I fully understand and comprehend the language, meaning and terms of this Consent Order, consisting of twenty (20) pages.

11/16/2011
Date

Laurence Scheidle
Laurence Scheidle, Ph.D.
Respondent

STATE OF MARYLAND

CITY/COUNTY OF Cecil :

I HEREBY CERTIFY that on this 16 day of November, 2011, before me, a Notary Public of the State and County aforesaid, personally appeared Laurence Scheidle, Ph.D., and gave oath in due form of law that the foregoing Consent Order was his voluntary act and deed.

AS WITNESS, my hand and Notary Seal.

Elizabeth L. Frederick

Notary Public

My commission expires:

Elizabeth L. Frederick
NOTARY PUBLIC
Cecil County, Maryland
My Commission Expires 10/27/2013