

**BEFORE THE
NORTH CAROLINA ADDICTIONS SPECIALIST
PROFESSIONAL PRACTICE BOARD**

NORTH CAROLINA ADDICTIONS)	
SPECIALIST PROFESSIONAL)	
PRACTICE BOARD,)	
Petitioner)	
)	FINAL DECISION
v.)	
)	EC File No. 640-20
MARK A. STURGIS, JR.,)	
Respondent)	
CADC No. 13535)	

THIS CAUSE came on before the North Carolina Addictions Specialist Professional Practice Board (“the Board”) on October 22, 2021, on the Notice of Hearing dated August 31, 2021, for consideration of the Proposal For Decision entered in *North Carolina Addictions Specialist Professional Practice Board v. Mark A. Sturgis, Jr.*, OAH File No. 21 SAP 00604 (“the OAH Contested Case”).

The Board, having reviewed the record in the OAH Contested Case; the Proposal For Decision; and having heard the arguments of counsel, adopts and makes the following:

FINDINGS OF FACT

1. Petitioner North Carolina Addictions Specialist Professional Practice Board (“the Board”), was established by G.S. 90-113.32, and is recognized as the registering, certifying, and licensing authority for substance abuse professionals described in the Practice Act. The Board was established to safeguard the public health, safety, and welfare, to protect the public from being harmed by unqualified persons, to assure the highest degree of professional care and conduct on the part of credentialed substance abuse professionals, to provide for the establishment of standards for the education of credentialed substance abuse professionals, and to ensure the availability of credentialed substance abuse professionals of high quality to persons in need of these services. The Board, under authority granted by the Practice Act regulates Board-credentialed persons offering substance abuse counseling services, substance abuse prevention services, or any other substance abuse services for which the Board may grant registration, certification or licensure. Prior to January 1, 2020, the Board was known as “North Carolina Substance Abuse Professional Practice Board”.

2. Respondent Mark A. Sturgis, Jr. (“Respondent”) is a citizen and resident of Mecklenburg County, North Carolina; and is neither a minor nor an incompetent person.

3. On July 14, 2015, Respondent was certified, by the Board, as a Certified

Substance Abuse Counselor ("CSAC") (CSAC No. 13535). As of January 1, 2020, Certified Substance Abuse Counselors were re-designated as Certified Alcohol And Drug Counselors ("CADCs"). Respondent's proper current status is CADC No. 13535.

4. Synovia Pettice ("Pettice") was licensed by the Board as a Licensed Clinical Addictions Specialist ("LCAS"), and was employed by Hope Haven from 2014 through October 23, 2020. (T. pp. 10-14, 25).

5. Hope Haven's main office was in Charlotte, North Carolina, and it provided residential services for individuals who completed a detox process and associated treatment program. (T. pp. 13-14).

6. Prior to the events in question, Hope Haven took over management of Serenity House, a facility that provided residential services for men in the Concord, North Carolina area. (T. p. 14). Respondent was employed by Hope Haven at the Serenity House facility (T. p. 35).

7. Pettice's duties as an employee of Hope Haven included providing clinical supervision for the staff; and in providing that service, she reviewed, approved and signed off on person centered plans ("PCPs"). (T. p. 14).

8. Hope Haven required that an LCAS sign off on any PCPs generated by CADCs. (T. pp. 14-15). PCPs generated at the Serenity House facility were faxed to the office in Charlotte; or hand delivered to the office in Charlotte, and were reviewed and executed at that location.

9. Pettice provided supervision to Respondent, including review of Respondent generated PCPs, which she would sign if approved (T. pp. 15-17), and was Respondent's clinical supervisor (T. p. 35). PCPs were to be reviewed for accuracy, appropriateness, currency, and to make sure that they were person centered. (T. p. 24).

10. On December 3, 2019, Respondent generated a PCP for Client A ("the Client A PCP"), and, rather than submitting the same to Pettice for review, approval and signature, he either signed her name or used a template signature for Pettice's signature. Pettice did not see the Client A PCP prior to use of her signature; did not approve the use of a template of her signature or execution of the PCP in her name; and did not approve the Client A PCP. (T. pp. 22-24, 40; Exhibit 3, p. 3).

11. On December 23, 2019, Respondent generated a PCP for Client B ("the Client B PCP"), and, rather than submitting the same to Pettice for review, approval and signature, he either signed her name or used a template signature for Pettice's signature. Pettice did not see the Client B PCP prior to use of her signature; did not approve of the use of a template of her signature or execution of the PCP in her name, and did not approve the Client B PCP. (T. pp. 18-20, 22-24, 37; Exhibit 3, p. 1).

12. On October 8, 2020, Respondent generated a PCP for Client C ("the Client C PCP"),

and, rather than submitting the same to Pettice for review, approval and signature, he either signed her name or used a template signature for Pettice's signature. Pettice did not see the Client C PCP prior to use of her signature; did not approve the use of a template of her signature, or execution of the PCP in her name; and did not approve the Client C PCP. (T. pp. 22-24; Exhibit 3, p. 4).

13. On October 10, 2020, Respondent generated a PCP for Client D ("the Client D PCP"), and, rather than submitting the same to Pettice for review, approval and signature, he either signed her name or used a template signature for Pettice's signature. Pettice did not see the Client D PCP prior to use of her signature; did not approve the use of a template of her signature, or execution of the PCP in her name; and did not approve the Client D PCP. (T. pp. 22-24; Exhibit 3, p. 5).

14. On October 9, 2020, Respondent generated a PCP for Client E ("the Client E PCP"), and, rather than submitting the same to Pettice for review, approval and signature, he either signed her name or used a template signature for Pettice's signature. Pettice did not see the Client E PCP prior to use of her signature; did not approve the use of a template for her signature, or execution of the PCP in her name; and did not approve the Client E PCP. (T. pp. 24-25; Exhibit 3, p. 6).

15. Respondent used a copy of, or template for, Pettice's signature, without her knowledge or consent, because Serenity House was having issues getting PCPs reviewed and signed in a timely fashion (T. pp. 40-41).

16. Respondent did not affix a copy of, or a template for, Pettice's signature to the PCPs with any ill or fraudulent intent and believe that doing so was in the clients' best interests.

17. Furthermore, all five (5) of the PCPs at issue have acceptable content; would have been approved if presented to an LCAS and reviewed; and were otherwise acceptable in form.

18. Nevertheless, while the PCPs at issue turned out to be acceptable in content and form, they were not reviewed by a LCAS; and LCAS review was both required by Hope Haven, and was appropriate in a clinical sense.

19. In particular, the purpose of having an LCAS review the PCPs was to ensure that the unlicensed clinicians creating the plans were proposing plans that were person centered, clinically appropriate, and otherwise acceptable; and to the extent that any PCP was not reviewed and approved by an LCAS, the additional protection provided by licensee review was, with respect to that PCP, lost, exposing the client to potential harm and injury.

20. Respondent's bypassing of LCAS review by affixing a copy of, or template for, Pettice's signature, with respect to each of the Client A PCP; the Client B PCP; the Client C PCP; the Client D PCP and the Client E PCP, did not cause any actual harm.

BASED UPON THE FOREGOING FINDINGS OF FACT, THE BOARD ADOPTS AND MAKES THE FOLLOWING:

CONCLUSIONS OF LAW

1. Respondent is subject to the North Carolina Addictions Specialist Professional Practice Act and the rules promulgated thereunder. The Board has jurisdiction over the person of the Respondent and the subject matter of this proceeding.
2. Respondent's acts in affixing a copy of, or template for, Pettice's signature on the Client A PCP; the Client B PCP; the Client C PCP; the Client D PCP and the Client E PCP constitute misrepresentation involving a client or person served, in violation of 21 NCAC 68 .0601(5)(c); and failure to follow the standards of skill and competence possessed and applied by professional peers certified in the State, in violation of 21 NCAC 68 .0601(6)(a).
3. Pursuant to the provisions of the 21 NCAC 68 .0101 *et seq.*, grounds exist grounds exist to discipline Respondent relating to the facts and circumstances set forth above.
4. Having considered all possible sanctions, including Warning; Admonition; Censure; Suspension for various amounts of time; and permanent Revocation, the Court concludes that the appropriate discipline to impose, with respect to the acts found above, is a sixty (60) day suspension of Respondent's certification as a Certified Alcohol And Drug Counselor.

BASED UPON THE FOREGOING FINDINGS OF FACT AND CONCLUSIONS OF LAW, IT IS NOW, THEREFORE, ORDERED ADJUDGED AND DECREED BY THE BOARD as follows:

1. Respondent's certification as a Certified Alcohol And Drug Counselor (CADC No. 13535) is suspended for sixty (60) days.
2. Each party should bear its own costs incurred in connection with the Board's investigation and the Contested Case.

NOTICE

To obtain judicial review of this Final Decision, the entity or individual seeking review must file a petition within thirty (30) days after service of a written copy thereof, with the Clerk of Superior Court of the County where the entity is headquartered, or the individual resides.

This the 22 day of October, 2021.

**NORTH CAROLINA ADDICTIONS
SPECIALIST PROFESSIONAL PRACTICE
BOARD**



Flo Stein, Board Chair