

Disclosure Statement

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The Colorado Department of Regulatory Agencies has the general responsibility of regulating the practice of licensed psychologists, licensed social workers, licensed professional counselors, licensed marriage and family therapists, licensed school psychologists practicing outside the school setting, licensed or certified addiction counselors, and unlicensed individuals who practice psychotherapy. The agency within the Department that has responsibility specifically for licensed and unlicensed psychotherapists is the Department of Regulatory Agencies, Mental Health Section, 1560 Broadway, Suite 1350, Denver, CO 80202, 303-894-7766.

Professional qualifications: Licensed Professional Counselor, Master's of Arts in Counseling from Colorado Christian University, Lakewood, Colorado; National Certified Counselor. In addition, I have completed the following training: Levels 1 and 2 of the Gottman Method Couples Therapy; Prepare/Enrich Couples Therapy; EMDR Basic. I have also received additional training in crisis and trauma. My formal education and ongoing training have prepared me to counsel individuals, groups, couples, families, parents, children, and teenagers.

Client Rights and Important Information:

- a. You are entitled to receive information from me about my methods of therapy, the techniques I use, the duration of your therapy, and my fee structure. Please ask if you would like to receive this information.
- b. You can seek a second opinion from another therapist or terminate therapy at any time.
- c. In a professional relationship such as ours, sexual intimacy between therapist and client is never appropriate. If sexual intimacy occurs, it should be reported to the Department of Regulatory Agencies, Mental Health Section.
- d. Generally speaking, the information provided by and to a client during psychotherapy sessions is legally confidential except as required by law, i.e., where there is a "threat of serious harm to self or others," as in the case of child abuse, suicide, homicide, or grave disability. If the information is legally confidential, the therapist cannot be forced to disclose the information without the client's consent. Information disclosed to a licensed mental health professional or an unlicensed psychotherapist is privileged communication and cannot be disclosed in any court of competent jurisdiction in the State of Colorado without the consent of the person to whom the testimony sought relates. Exceptions to the general rule of confidentiality are listed in the Colorado Statutes (C.R.S. 12-43-218). Provisions concerning disclosure of confidential communications shall not apply to any delinquency or criminal proceedings, except as provided in section 13-90-107 C.R.S. and for certain legal exceptions that will be identified by the therapist should any such situation arise during therapy.

I will not release your information to anyone, including your family and insurance company if you are a legal adult, without *written* consent. If you are a minor, it is the legal right of your parents to have access to the information that we discuss in our sessions. Due to the importance of trust between client and therapist, when the client is a minor child, I will offer parents general information about the therapeutic process and overall themes but not specific details about what information is exchanged during each session. If, at any time, I feel like your child is engaging in dangerous behavior, I will immediately inform you of the situation or have your child do so as part of the therapeutic process. I will regularly update you on your child's progress, and I encourage you to contact me as frequently as you feel is needed. I will not provide you with updates after each session; however, if you need to speak with me about your child's behavior, please call prior to his/her weekly session or arrange a time to come in and speak with me. It is important that your child feels that my office is a place where he/she can trust me enough to share the sensitive things that may be underlying the presenting problem. I am sensitive to a parent's needs to be involved in the process, and that is why parenting and family sessions are typically a regular occurrence during the treatment process.

In case of an emergency: I do not carry a beeper nor am I available at all times. If, at any time, this does not feel like sufficient support, please inform me, and we can discuss additional resources. Generally, I will return telephone calls within 24-48 hours. If you have a mental health emergency, I encourage you not to wait for a call back, but to do one or more of the following:

- Call 911
- Go to your nearest emergency room

In case of any personal emergency when I am unable to contact my clients, I have designated Lorie Thomas, MA, to have access to my client's first name(s) and contact information only. In case of my death or permanent incapacitation, Lorie Thomas, MA, has agreed to abide by my confidentiality statement (listed in this informed consent) and will become the sole owner of all case files held in my possession at that time. Any dissemination of information from those files will then be at the discretion and clinical judgment of Ms. Thomas. Upon my permanent incapacitation, Ms. Thomas may be contacted at 720-628-1961.

Email, Computers, Cell Phones: These types of communication can be helpful and efficient ways to communication between sessions. However, it is important for you to be aware that there is always a degree of risk of breach of privacy when communicating in this way. Please be aware that technology at this time cannot guarantee privacy when communicating in this way. Likewise, if we are working together online or via cell phone, please be aware of who has access to your computer, cell phone, and other electronic information.

Fees: My maximum fee for a 60-minute session is \$80.00. I do, however, work on the following sliding scale, which is based on a family's income and ability to pay:

Annual Household Income	Cost/Session
\$80,000 and Over	\$80
\$70,000 to \$79,000	\$70
\$60,000 to \$69,000	\$60
\$50,000 to \$59,000	\$50
\$40,000 to \$49,000	\$40
\$30,000 to \$39,000	\$30
\$20,000 to \$29,000	\$20
Less than \$20,000	Determined by client and therapist

Cancellation: Your session is reserved for you. In the event that you will be unable to keep an appointment, please notify me no later than 24 hours in advance.

Special Note: I split my time between Thornton, Colorado, and Phoenix, Arizona. Therefore, during the winter months (November through March), I live outside of Colorado. However, I will be returning twice a month to meet with clients, and I will be available through email, telephone, and/or Skype. In the event of an emergency situation, I will return to Denver as quickly as possible. I have also made arrangements with two counseling associates, Lorie Thomas, and Dr. Ron Veatch, to be available in case of an emergency.

If you have any questions or would like additional information, please feel free to ask me.

I have read the preceding information and understand my rights as a client.

Client Signature

Date

Therapist Signature

Date