Disclosure Statement

Colorado state law requires that I provide you with a disclosure statement outlining my credentials as a therapist and your rights as a client. The following statement covers the points on which you should be informed according to Colorado Revised Statute (C.R.S) 12-43-214. If you have any questions about the material contained in this statement or about any aspect of your work with me.

I. General Information
Erin Schweber
Counseling Intern
Faculty and Staff Assistance Program, CU- Boulder
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303-492-6244
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Education, Training and Experience.
I have 15 years experience working in community services primarily in crisis intervention, case management, community education and prevention as well as public health advocacy. I am also a trained birth doula and have worked for several years with high-risk teen parents and families. I received a dual Bachelor of Arts degree in both Women's Studies and Political Science from the University of Nevada. I am currently a Master of Arts in Clinical Mental Health Counseling candidate in the Graduate School of Counseling and Psychology at Naropa University. My focus area is in the Somatic Counseling Program with a dual concentration in Dance Movement Therapy and Body Psychotherapy and I am expected to graduate in May 2018. My training is primarily in somatic modalities, as well as Cognitive Behavioral Therapy and Dialectical Behavioral Therapy, mindfulness, trauma informed and group psychotherapy.

Supervision
I am supervised by Connie North, PhD, LMFT, Faculty and Staff Assistance Program, 311 Marine Street, Boulder CO 80309, Ph. 303-492-1508, License #0001234.

II. Client Rights and Important Information
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, and registered individuals who practice psychotherapy. The agency within the Department that has responsibility specifically for licensed and registered psychotherapists is the Department of Regulatory Agencies, Mental Health Section, 1560 Broadway, Suite 1350, Denver, Colorado 80202, (303) 894-7800.

The practice of licensed or persons in the field of psychotherapy is regulated by the Mental Health Licensing Section of the Division of Registrations. The Board of Licensed Professional Counselor and Certified Addiction Counselor Examiners can be reached at 1560 Broadway, Suite 1350, Denver, Colorado 80202, (303) 894-7800. As to the regulatory requirements applicable to mental health professionals: a Licensed Clinical Social Worker, a Licensed Marriage and Family Therapist, and a Licensed Professional Counselor must hold a master’s degree in their profession and have two years of post-masters supervision. A Licensed Psychologist must hold a doctorate degree in psychology and have one year of post-doctoral supervision. A Licensed Social Worker must hold a master’s degree in social work. A Psychologist Candidate, a Marriage and Family Therapist Candidate, and a Licensed Professional Counselor Candidate must hold the necessary licensing degree and be in the process of completing the required supervision for licensure. A Certified Addiction Counselor I (CAC I) must be a high
school graduate, and complete required training hours and 1000 hours of supervised experience. A CAC II must complete additional required training hours and 2,000 hours of supervised experience. A CAC III must have a bachelor’s degree in behavioral health, and complete additional required training hours and 2,000 hours of supervised experience. A Licensed Addiction Counselor must have a clinical Master of Arts degree and meet the CAC III requirements. A Registered Psychotherapist is registered with the State Board of Psychotherapists, is not licensed or certified, and no degree, training or experience is required.

Your Rights.
You are entitled to receive information from me about my methods of therapy, the techniques that I use, the duration of your therapy (if I can determine it), and my fee structure. Please ask if you would like to receive this information. Concerning fees, services provided to you by the Faculty and Staff Assistance Program as a faculty or staff member of CU-Boulder are free of charge. You may receive up to 7 sessions of free counseling during a year starting with the date that you attended your first (intake) appointment. You can seek a second opinion from another therapist or terminate therapy with me at any time. In a professional relationship (such as ours), sexual intimacy between client and counselor is never appropriate. If sexual intimacy occurs, it should be reported to the board that licenses, registers, or certifies the licensee, registrant or certificate holder.

Confidentiality.
Generally speaking, the information provided by and to a client during therapy sessions is legally confidential if the therapist is a licensed marriage and family therapist, a licensed social worker, a licensed professional counselor, a licensed psychologist, or a registered psychotherapist. 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 marriage and family therapist, a licensed social worker, a licensed professional counselor, a licensed psychologist, or a registered 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.

There are exceptions to the general rule of legal confidentiality. These exceptions are listed in the Colorado statutes (C.R.S. 12-43-218). These exceptions include that I am:

- Legally required to report child abuse and/or neglect, elder abuse and/or neglect, abuse/danger to someone or others who may not be able to protect themselves;
- Legally required to intercept a client I believe is a threat to self or others.

Also,
- You should be aware that 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.
- Confidentiality would not apply in situations where a client places his or her mental status at issue in a legal action or where a client brings an action against her or her therapist. There are other exceptions that I will identify to you if the situations arise during therapy.

In addition,
- At times therapists seek consultation from other therapists or supervisor(s), or in staff or case consultation meetings. These could be possible venues when information about you is shared with other professionals. Your information will remain confidential among this/these consulting professional(s).
- FSAP is a training site for clinicians and there are usually interns under the direct daily supervision of a licensed FSAP counselor. For the purposes of consultation and supervision, your case information may be shared and discussed with the other members of the clinical team.
- As part of the FSAP training function to interns, sessions may be recorded for supervision purposes (video- or audio-taped). If you are not working directly with an intern, it is possible that, on some occasions, an intern might observe a counselor’s session. In the event of an observed or recorded session, permission from you will be requested and you will be given an additional disclosure statement to sign. This statement will explain in detail our policies regarding the use of recordings. When a session is recorded, interns may review the recordings or portions of the recordings with their supervisors, who will then
discuss and provide feedback about their session. Once recordings have been reviewed, they will be erased.

- Our administrative assistant will typically receive initial phone calls and will set up an appointment for you with one of our FSAP counselors. She/he may be privy to some information regarding you and the nature of your case.
- While there may be certain exceptions, I maintain a “no secrets” policy in couples counseling. This means that if individuals in the relationship meet with me individually while also receiving couples counseling from me, all parties in couples counseling may be privy to information shared during the individual session(s).

III. My Clinical Approach
My approach to counseling is integrated and eclectic and is grounded in client-centered, trauma informed, mindfulness, and body-based approaches. I also incorporate aspects of Cognitive Behavioral, Dialectical Behavioral and Gestalt therapies. Sessions will focus on identifying and building on your existing strengths and skills as we work toward supporting your long-term health and wellbeing. As a somatic therapist, I have a particular interest in exploring the ways that embodying experiences and using the body can be a source of insight, strength, support, integration, and healing. Somatic and movement based approaches will be woven into the traditional talk therapy session based on the client’s interest and comfort. If at any point you would like additional information and/or have questions about any aspect of your therapy with me, please feel free to ask.

IV. Signature
I have read the preceding information (Disclosure Statement), it has also been provided verbally, and I understand my rights as a client or as the client’s responsible party.

__________________________________________________________________________
Client’s name (Print)

__________________________________________________________________________
Client’s or Responsible Party’s Signature Date

If signed by Responsible Party, please state relationship to client and authority to consent:

__________________________________________________________________________