

Disclaimer: This is not a legal document and is an example of a fictitious agency's disclosure statement with more than one counselor who wishes to include all counselors on one form.

Example of a Disclosure Statement for Addiction Counselors working in a DBH Licensed Agency

December 2011

Garden Path Counseling Services
999 Garden Path Lane
City of Paths, Colorado
303-999-9999

DISCLOSURE STATEMENT

Garden Path Counseling Services is a substance use disorder treatment program licensed by the Division of Behavioral Health, Colorado Department of Human Services. The counseling staff employed at Garden Path and their qualifications are as follows:

_____ Jack Flowers, BA, CAC III. Mr. Flowers earned his Bachelors of Arts degree in Psychology from Colorado State University and is credentialed in Colorado as a Certified Addiction Counselor, Level III. He has been employed in the field of addiction counseling for seven years and utilized a cognitive behavioral approach to treatment.

_____ Mary Berries, MS, CAC II. Ms. Berries earned her Master of Science degree in Counseling Psychology from the University of New Mexico and is credentialed in Colorado as a Certified Addiction Counselor, Level II. She has worked for 10 years as a mental health and substance use disorder counselor and has specialized training in co-occurring disorders.

_____ Willow Trees, CAC II. Ms. Trees holds a high school diploma and a two-year Associates degree in Addiction Studies from Metro State College. She is currently enrolled in a Bachelors program at Metro with anticipated graduation in May, 2012. She has worked as a detox counselor for two years and as an addiction counselor for the past 18 months.

_____ Autumn Leaves, Trainee. Ms. Leaves is a trainee working toward her certification as a CAC I. Ms. Leaves entered the field in January, 2011 and is clinically supervised by Mr. Jack Flowers, CAC III.

1. The practice of registered, certified or licensed persons in the field of psychotherapy is regulated by the Mental Health Licensing Section of the Division of Registrations. Questions and complaints regarding addiction counselors may be addressed to:

Board of Addiction Counselor Examiners
1560 Broadway, Ste. 1350, Denver, CO 80202
303-894-7800

The Division of Behavioral Health has the general responsibility for regulating practices of licensed substance use disorder treatment programs in the State of Colorado. Questions and complaints may be directed to:

Colorado Department of Human Services, Division of Behavioral Health
3824 W. Princeton Circle, Denver, CO 80236 (303) 866-7400

2. The regulatory requirements applicable to mental health professionals are as follows:

- ✓ Registered psychotherapist is a psychotherapist listed in the State’s database and is authorized by law to practice psychotherapy in Colorado, but is not licensed or certified by the State and is not required to satisfy any standardized educational or testing requirements.
 - ✓ Certified Addiction Counselor I (CAC I) must be a high school graduate or the equivalent, complete required training hours and 1000 hours of clinically supervised work experience.
 - ✓ Certified Addiction Counselor II (CAC II) must meet the CAC I requirements, complete additional training hours above the CAC I, and 2000 hours of clinically supervised work experience.
 - ✓ Certified Addiction Counselor III (CAC III) must have a Bachelor’s degree in the behavioral health sciences or field; complete additional training above the CAC II, and 2000 hours of clinically supervised work experience.
 - ✓ Licensed Addiction Counselor must have a clinical Master’s degree, meet the CAC III requirements, and pass a national examination in addiction treatment.
 - ✓ Licensed Social Worker must hold a master’s degree in social work.
 - ✓ Psychologist Candidate, Marriage and Family 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.
 - ✓ Licensed Clinical Social Worker, 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.
 - ✓ Licensed Psychologist must hold a doctorate degree in psychology and have one year of post-doctoral supervision.
3. You are entitled to receive information from your therapist about the methods of therapy, the techniques used, the duration of your therapy (if known) and the fee structure. You can seek a second opinion from another therapist or terminate therapy at any time. In a professional relationship, sexual intimacy is never appropriate and should be reported to the Board that registers, certifies or licenses the registrant, certificate holder or licensee.
4. Generally speaking, the information provided by and to the client during therapy sessions is legally confidential and cannot be released without the client’s consent. There are exceptions to this confidentiality, some of which are listed in Section 12-43-218 of the Colorado Revised Statutes as well as other exceptions in Colorado and federal law. For example, mental health professionals are required to report child abuse to authorities. If a legal exception to confidentiality arises during therapy, if feasible, you will be informed accordingly.
5. I understand that my alcohol and/or drug treatment records are protected under the Federal Confidentiality Regulation, 42 C. F. R., Part 2, governing Confidentiality of Alcohol and Drug Abuse Patient Records. Confidential information cannot be disclosed without my written permission unless otherwise provided for by the regulations.

If your practice is covered by HIPAA, please add the following: “Exceptions to confidentiality may also be found in the Notice of Privacy Rights you were provided.”

6. I have read the preceding information, it has been provided to me verbally, and I understand my rights as a client or as the client’s responsible party.

Print Client Name

Client Signature or Responsible Party’s Signature

Date