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Disclosure Statement for Supervision/Consultation of Psychotherapists

Ethical practice and state law require that you receive information regarding your rights as a Supervisee or Consultee in the state of Colorado.

I am a Licensed Professional Counselor (license #11337), a Certified Synergetic Play Therapy Supervisor, and a Level II PACT Couple Therapist, with a BA in Mathematics from Cornell University (1991) and an MA in Counseling Psychology from Naropa University (2008).

As to the regulatory requirements applicable to mental health professionals: A Licensed Professional Counselor must hold a master's degree in their profession and have two years of post-master's supervision. I have been licensed in the state of Colorado since 2012 and have 9 years of experience providing psychotherapy in private practice in Colorado. Prior to private practice, I worked as a wilderness therapy guide (2004-2006), a high school math teacher (2000-2004), and a software developer (1991-2000)

Supervision/consultation will focus on counseling provided by the supervisee/consultee as practiced in a clinical practice setting such as an agency or private practice. If applicable, the supervisor will support the supervisee's/consultee's progress toward certification and/or licensure. The relationship is designed to support your clinical growth and development.

The supervisee/consultee will be responsible for the following conditions and terms:

1. Registration with DORA at the appropriate level (registered psychotherapist, LPC, LPCC), including passing the Colorado Jurisprudence exam.
2. Provide a copy of your disclosure form for my records.
3. Purchase of a \$1-\$3 million professional liability insurance policy and provide a copy.
4. To review the State of Colorado Code of Ethics and agree to conduct themselves in a professional and ethical manner per the above mentioned policies and codes.
5. To maintain primary responsibility for meeting all standards and qualifications set by the State of Colorado and all relevant organizations and government agencies.
6. To seek professional psychotherapy if personal issues arise that cannot be resolved within the professional supervisory relationship.

In addition, Colorado law requires the supervisee/consultee to:

1. Protect confidentiality of every client.
2. During the initial intake session inform clients of the name of his/her clinical supervisor (for interns and/or unlicensed practitioners) and review his/her disclosure statement, which will be signed and kept on record.
3. Report suspicion and/or direct knowledge of abuse or neglect.
4. Report the intent to do harm to others (homicide) or self (suicide) of all clients.
5. Practice only within the areas of his/her professional expertise.
6. Not violate any of the Prohibited Actives in the Colorado Revised Statutes.

Additionally supervision shall include but is not limited to the following:

1. Monitoring the supervisee's activities to verify s/he is providing services that meet generally accepted standards of practice;
2. Verifying that it is the practice of any supervisee to provide the mandatory disclosure form as required pursuant to C.R.S. § 12-43-214;
3. If appropriate, verifying that clients are informed as to any changes in the supervisory relationship;
4. Giving an adequate termination of supervision notice to the supervisee;
5. Keeping records that document supervision that meet the generally accepted standards of practice;
6. Assisting the supervisee in becoming aware of and adhering to all legal, ethical, and professional responsibilities;
7. Assuring that no inappropriate relationships exist between the supervisor and supervisee, and supervisor

- and client;
8. Assuring the supervisee meets any licensing, certification or registration requirements prior to engaging in any Psychotherapy;
 9. Assisting to assure that the supervisee is in compliance with the Mental Health Practice Act;
 10. Verifying and assuring the supervisee is in compliance with any existing restricted licensure, certification or registration status or probation.

RECORD KEEPING POLICY

Supervisees shall create and shall maintain a record for each client. This record shall be retained for a period of seven (7) years, commencing on either the termination of professional counseling services or the date of last contact with the client, whichever is later. Exception. When the client is a child, the record shall be retained for a period of seven (7) years commencing either upon the last day of treatment or when the child reaches eighteen (18) years of age, whichever comes later, but in no event shall records be kept for more than twelve (12) years.

The record shall contain, as applicable to the mental health services rendered, the following information:

1. Name of treating therapist;
2. Client's identifying data to include name, address, telephone number, gender, date of birth, and if applicable the name of the parent or guardian.
3. If the client is an organization, the name of the organization, telephone number and name of the principal authorizing the mental health provider's services or treatment;
4. Reason(s) for the psychotherapy services;
5. Mandatory disclosure statement(s);
6. Dates of service including, but not limited to the date of each contact with client, the date on which services began, and the date of last contact with client;
7. Types of service;
8. Fees;
9. Any release of information;
10. The record shall justify and describe the assessment, diagnosis and therapy/treatment administered in a legible document. The records must be prepared in a manner that allows any subsequent provider to yield a comprehensive conclusion as to what occurred;
11. Name of any test administered, each date on which the test was administered, and the name(s) of the person(s) administering the test;
12. A final closing statement (if services are over).

ELECTRONIC SUPERVISION POLICY

Supervision by electronic means includes only methods such as Skype or similar means that provide for uninterrupted, secure, means to communicate utilizing voice and video simultaneously over the internet (communication solely by telephone is not sufficient).

Supervision by electronic means is acceptable if:

- (1) the system utilized is an interactive, real-time, system that provides for visual and audio interaction between the licensee and the supervisor;
- (2) the first two meetings are face-to-face and in-person, if possible;
 - (a) the initial meeting with any supervisor shall be a minimum of two (2) hours;
 - (b) all subsequent meetings shall be sufficient length as determined by the supervisor and in accordance with generally accepted standards of practice for supervisors;
 - (c) additional face-to-face meetings should occur not less than every six (6) months in conjunction with the regularly scheduled electronic meetings, if possible.
 - (d) cases are reviewed in the same manner as when meeting in person.

This policy in no manner relieves a mental health professional from adhering to all statutory, rule, policy or disciplinary requirements, including but not limited to adhering to generally accepted standards of practice for supervision, ensuring confidentiality, adequate record-keeping as well as recording only with permission of both parties.

The practice of counselors is regulated by the Colorado State Department of Regulatory Agencies.

You can contact the grievance board if you have any concerns or complaints about the services you have received:

1560 Broadway, Suite #1340, Denver, CO 80202. Or you can call: (303) 894-7766.

The fee will be \$80 for a 50 minute session, and initial two hour meeting for online supervision is \$100, unless the supervisee/consultee is a student of the Play Therapy Institute of Colorado ("PTIC") and therefore arranges fee and payment through PTIC.

There is no charge for phone consults under 15 minutes. Calls of longer duration will be prorated at \$20 for each additional 1/4 hour. If I am responsible for starting late, I will make up the time. If you arrive late for your session that time will be lost. If you miss an appointment without giving me 24 hours notice, you will be charged for that session.

This contract is based upon mutual agreement of both Supervisor/Consultant and Supervisee/Consultee. Either party can cancel this contract immediately without cause.

By signing below, the supervisee/consultee affirms that she/he has read and reviewed this supervision/consultant contract/disclosure statement and agrees to all of the terms.