ξ Dr. Sandra Varley, LPC, LLC

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PRIVACY RIGHTS AND OFFICE POLICIES

PRIVACY RIGHTS

Following are the legal rights which all mental health recipients have, and which we at are important for you to understand. Feel free to ask, if you need any clarification.

- 1. You are entitled to receive information about the methods of therapy, the techniques used, the duration of therapy, if known, and the fee structure.
- 2. You have the right to be informed of your psychotherapist's degrees, credentials, and licenses. Briefly, my background is as follows:

I have a Masters Degree in Counseling from the University of Northern Colorado, and a Doctorate from Pacifica Graduate Institute. I have been a practicing clinician since 1987, and have been licensed as a Professional Counselor since 1993. I have specialized training in Sexuality, including sexual trauma and abuse, addiction, and dysfunction, as well as Marriage and Family therapy, In addition to maintaining my clinical practice, I am an affiliate faculty in the Master of Arts in Counseling Program at Regis University. Please feel free to ask for any other details about my experience or training. I'll be happy to talk with you further.

- 3. You may seek a second opinion from another therapist at any time. You may end your therapy at any time.
- 4. In a professional relationship, sexual intimacy is never appropriate and is illegal in Colorado. It should be reported to the Colorado Grievance Board.
- 5. The information you provide during therapy sessions is legally confidential if your therapist is licensed. Sandra is a Licensed Professional Counselor, therefore, all information is legally confidential. The exceptions to this are twofold:
 - a. If you present a danger to yourself or others, your therapist will need to make arrangements to keep you safe. This may include communicating with other medical professionals, or law enforcement agencies.
 - b. If you disclose that a child is being abused, all therapists are required by law to report that to Social Services.

6. I am involved in a monthly consultation group with other licensed mental health professionals, wherein I may or may not share information about our work together. If I do mention our work together, I will maintain your anonymity. Ways to ensure this include, but are not limited to: not disclosing identifying information, such as names, initials, recognizable occupations, and non-essential identifying information. As licensed professionals, the group participants are bound by the same requirements of client confidentiality as all licensed clinicians.

7. The practice of licensed or registered 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 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:

✓ 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 by the state and is not required to satisfy any standardized educational or testing requirements to obtain a registration from the state.

 \checkmark Certified Addiction Counselor I (CAC I) must be a high school graduate, complete required training hours and 1,000 hours of supervised experience.

 \checkmark Certified Addiction Counselor II (CAC II) must complete additional required training hours and 2,000 hours of supervised experience.

✓ Certified Addiction Counselor III (CAC III) must have a bachelors degree in behavioral health, complete additional required training hours and 2,000 hours of supervised experience.

 \checkmark Licensed Addiction Counselor must have a clinical masters degree and meet the CAC III requirements.

✓ Licensed Social Worker must hold a masters degree in social work.

✓ 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.

✓ Licensed Clinical Social Worker, a Licensed Marriage and Family Therapist, and a Licensed Professional Counselor must hold a masters degree in their profession and have two years of post-masters supervision.

 \checkmark A Licensed Psychologist must hold a doctorate degree in psychology and have one year of post-doctoral supervision.

4. You are entitled to receive information from your therapist about the methods of therapy, the

OFFICE POLICIES

RECORDS

Records are stored safely with attention to your privacy for at least 10 years, as required by Colorado Statute. They will only be released with your written permission and

direction. If you were seen in a couple or family session, all adults present would have to authorize the release of the record. It is my policy to summarize the content of the record when requested, rather than to release the entire record itself. You will be granted reasonable access to your record. If you choose to read your record, it is my policy to be present in order to respond to any questions or confusion you may have about the contents.

APPOINTMENTS

If you are unable to keep a scheduled appointment, you must notify the office 24 hours ahead of time, in order to avoid being charged the full fee for the time. The phone is covered 24 hours a day by a fully confidential voice-messaging system. If I'm not available when you call, you may leave a message and your call will be returned as soon as possible. You may call between sessions in the event of an emergency. If needed, extra sessions can also be scheduled. If you call and need extended processing time, a full session at the office will be scheduled that same day.

FEES AND INSURANCE

Sessions for individual couples and family therapy are billed at \$125 per session. A \$15 discount is applied for sessions paid in full at the time of the visit. Payments may also be made monthly, and may be made by credit card through Pay Pal. The office will assist you in determining your health insurance coverage, and will provide you with all necessary forms for obtaining insurance reimbursement from your company. Instructions for filing claims will also be given to you.

The information in this document has been provided to me verbally and in writing.

Client Signature

Date

Clinician Signature

Date