



McLaughlin Counseling

## DISCLOSURE STATEMENT

### 1. THERAPIST INFORMATION

**Name:** Maureen McLaughlin, LPC  
**Address:** 12150 E Briarwood Ave Suite 202 Centennial, CO 80112  
**Telephone:** 720.232.1651  
**Email:** maureen@mclaughlincounseling.com

### 2. THERAPIST CREDENTIALS

**Licensure:** Licensed Professional Counselor, State of Colorado (LPC)

**Degrees:** University of Colorado, Colorado Springs: MA, Community Counseling and Human Services 2006  
Michigan State University: BA, Elementary Education, Minors: History and Psychology 2001

**Areas of Practice:** Attachment & Trauma, EMDR, Co-Parenting, Reunification, Therapeutic Supervised Visitation, Parenting Education, Adolescent Therapeutic Mentoring, Emotive Couples Therapy, Restorative Justice, Clinical Supervision

### 3. REGULATION OF PSYCHOTHERAPISTS

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 regulatory boards can be reached at 1560 Broadway, Suite 1350, Denver, Colorado 80202, (303) 894-7800. The regulatory requirements for mental health professionals provide that a Licensed Professional Counselor must hold a master's degree in their profession and have two years of post-masters supervision.

### 4. CLIENT RIGHTS AND IMPORTANT INFORMATION

- a. You are entitled to receive information from me about my methods of therapy, the techniques I use, the potential duration of your therapy, and my therapy fees. 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 a therapist and a client is never appropriate. If sexual intimacy occurs, it should be reported to the Department of Regulatory Agencies.
- d. Generally speaking, information provided by and to a client in a professional relationship with a psychotherapist is legally confidential, and the therapist cannot disclose the information without the client's consent. There are several exceptions to confidentiality which include: (1) I am required to report any suspected incident of child abuse or neglect to the local child abuse hotline; (2) I am required to report any threat of imminent physical harm by a client to law enforcement and to the person(s) threatened; (3) I am required to initiate a mental health evaluation of a client who is imminently dangerous to self or to others, or who is gravely disabled, as a result of a mental disorder; (4) I am required to report any suspected threat to national security to federal officials; and (5) I may be required by Court Order to disclose treatment information.

- e. Under Colorado law, C.R.S. § 14-10-123.8, parents have the right to access mental health treatment information concerning minor children under the age of 15, unless the court has restricted access to such information. If you request treatment information from me, I may provide you with a treatment summary, in compliance with Colorado law and HIPAA Standards.
- f. A 24-hour notice is required for all cancelations.
- g. McLaughlin Counseling uses email as the primary form of communication with the other professionals involved in your case, for which you have signed a release. McLaughlin Counseling will include a privacy notice at the conclusion of all emails.

I have read the preceding information and understand my rights as a client. I acknowledge that I have been offered a copy of this Disclosure Statement.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Provider Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date