

Disclosure Statement

Amy Davenport Dakin, LCPC, LCMHC, NCC

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Degree: Masters of Education (Counselor Education)

University of Maine at Orono - May 2000

Licensure: New Hampshire Licensed Mental Health Counselor (LMHC) #1265

Issued: 6/27/17

Expires: 06/27/21

Licensure: Maine Licensed Clinical Professional Counselor (LCPC) #2166

Issued: 9/29/04

Expires: 12/31/22

Areas of Competence:

I am trained to work with children, adolescents and adults as individuals, couples and groups. I am trained to work with people diagnosed with a mental health and/or substance abuse diagnosis. I have been working in the mental health field since January 1994. I initially worked in a community mental health agency with children/adolescents with a behavioral, emotional and/or developmental diagnosis and provided psychoeducation to their families. I co-facilitated experiential education groups for children, taught and modeled parenting skills, developed behavior management plans and treatment plans. I have worked with children in foster care programs, group homes and early childhood programs. I have educated children, adolescents and families in emotional, cognitive, and social learning.

In 1996 I started working in a psychiatric setting. I worked on the adolescent inpatient unit and provided direct patient care, facilitated milieu interactions, facilitated treatment and treatment activities, and developed skills in crisis intervention. I have worked in a group home for adolescents with a mental health diagnosis. I also worked in the intake center at a psychiatric hospital. I have provided case management to adults diagnosed with a severe and disabling mental illness with multiple needs. I assisted people in managing mental health, substance abuse and dual diagnosis issues.

I have participated in the domestic violence program sponsored by Emerge: *Counseling and Education on Male Violence and Preventing Teen Violence*. I co-facilitated batterer's intervention groups from 1996 to 2002.

In May of 2000 I started practicing as a licensed therapist. I worked on an inpatient

unit for adults for approximately one year. I provided outpatient therapy in a community setting working with adults with a mental health and/or substance abuse diagnosis for approximately one year. In addition, I provided emergency services in the ER to provide emergency assessments to adults, adolescents and children experiencing a psychiatric crisis. I practiced as a mental health therapist at Kawamura and Associates from February 2002 to September 2005 providing individual counseling and group counseling to adults and adolescents with a mental health and/or substance abuse diagnosis. I started my own practice in October 2005.

I tend to focus on a cognitive behavioral orientation. I do however, employ various techniques. Specific information is available upon request. I am trained in other specialty areas such as EMDR (level I and II) and DBT for the treatment of Borderline Personality Disorder. I am comfortable working with a variety of issues. I use a variety of approaches and interventions depending on the identified need and treatment plan developed. I have extensive experience working with first responders and with Employee Assistance Programs.

Currently I specialize in treating first responders, military personnel and their families. I have extensive experience working with trauma issues. I also tend to take a holistic approach incorporating nutrition, exercise and overall education to support the individual healing process. I participate in CISM programs and crisis intervention.

Below is a list of certifications, licensure and associations:

- EMDR Certified
- CCTP (Certified Clinical Trauma Counselor)
- CMHIMP (Certified Mental Health Integrative Medicine Provider)
- BC-TH (Board Certified Tele-Mental Health Provider)
- NCC (National Certified Counselor with NBCC)
- Member of the American Counseling Association
- LCPC (Licensed Mental Health Counselor, Maine)
- LCMHC (Licensed Clinical Mental Health Counselor, New Hampshire)
- DBT Certified

Course of Treatment:

This disclosure statement is provided in addition to the disclosure statements and paperwork signed at your initial appointment at this office. This statement provides detailed information regarding therapy procedures.

I believe therapy is an active process for both the therapist and the client. Treatment goals often involve helping you to learn more about yourself and learning to change your thoughts, feelings and behaviors so you can feel better about yourself and how you interact with others and the community. **Since successful therapy involves lifestyle changes, I encourage you to think carefully about your commitment to therapy. Making the changes to better your life will be much harder if you miss appointments.** I request a 24 hour notice for cancellations. In addition, if you miss 2 consecutive appointments we will need to review your situation to see if it is the right

time to be in therapy. In addition two consecutive missed appointments could result in termination from therapy. A one time appointment can be made with this office if necessary to discuss the situation.

At our initial meeting we will work to identify the current problem(s). At this time a treatment plan will be developed that identifies personalized goals, objectives and process for reaching these goals, and the means by which your progress will be measured and reviewed over time. An initial intake is completed over the first couple of sessions that includes medical, psychiatric, substance use, family, developmental, social, educational and vocational history. This information will be reviewed in therapy sessions. If necessary throughout your treatment referrals and recommendations may be made to outside providers. You may be asked to do assignments and record your thoughts during the course of treatment. Psychotherapy can bring up difficult feelings and may ask you to look at different topics. Sometimes it may feel like it gets worse before it gets better. Please be sure to talk with me if you feel these experiences are interfering in therapy or in your daily functioning. Unfortunately, there are no guarantees for the outcome of therapy. Many factors can have an impact on an individual's outcome. If you are unhappy about how things are going or if you ever feel uncomfortable, please make your concerns known to me as soon as you can. I hope we can work together to find acceptable solutions. If an acceptable solution cannot be reached I will work with you to make a referral to another therapist or consult with staff at this office.

If you need or want to stop therapy I encourage you to discuss this with me openly. I also ask that we have at least one termination session where we will review your initial goals, examine what has been accomplished through therapy and discuss the problems you encountered in treatment as well as the successes. In addition outside referrals can be provided. If I feel treatment is not appropriate I will address these concerns directly to you.

If necessary we will develop an individualized safety plan. You are encouraged to contact the office in an emergency during business hours (Monday - Thursday 9am to 5pm) but you are also encouraged to utilize crisis services since I am not always available. My phone time is limited since I am in session for most of the day. These resources include the adult community twenty four hour crisis hotline at 1-888-568-1112 for Maine and 1-603-433-5270 in New Hampshire. In addition you also are encouraged to go to the nearest emergency room if necessary.

Since I am a solo practitioner I do not offer case management services, court services or additional time for paperwork and coordination of care. If these services are needed for a particular situation I do provide these services at my discretion on a case by case basis. If a case will require a substantial amount of court time, paperwork, phone calls, consultation, emails and other services outside of the therapy session a retainer fee will be requested. If it is decided to bill hourly I do charge my usual fee of 150 per hour. This cannot be billed to insurance companies and will be billed to the client. Fees are addressed in detail on the office policies and procedures form that must be signed at the first session.

Confidentiality

Treatment information is shared within a supervisory situation and with the identified providers within our office. For others, a written release will be obtained giving permission for the sharing of information. Treatment information is confidential, except as specified in the *Rights of Recipients of Mental Health Services*. Below are six exceptions to confidentiality explained briefly:

1. Threat of serious harm to self or others.
2. Reasonable suspicion of child abuse, or abuse of elder or an incapacitated person.
3. Court Order
4. Voluntary release signed by the client and/or guardian.
5. In defense against any legal actions or formal complaint which a client makes before a court or regulatory board.
6. During supervisory consultations and peer consultations.

Supervision:

Treatment information is shared in supervision/peer consultation to the extent that is necessary to ensure continued quality of your treatment. I meet with colleagues at least once per month to review clinical issues.

Fee Schedule and Policy Regarding Third Part Payments:

You are expected to contact your insurance company in regards to any fees for services. This is reviewed at the initial appointment. Payments and fees are expected at the time of the appointment. All billing questions and concerns should be dealt with immediately with myself. If you sign permission and provide insurance information your insurance company will be billed. You will be responsible for all fees that may not be covered by your insurance. Please refer to the fee agreement that is provided by this office. There are late fees and possible discharge from treatment if bills are not paid upon agreement. Any accounts that are over 30 days will be sent to a debt recovery agency unless payment arrangements have been made.

Hours of Business:

I work on a per diem basis. This means that I may not always be available if I am not seeing clients. In addition I am only paid when I see clients. Therefore 24 hour notice of cancellations is required except in extenuating circumstances. If multiple appointments are missed I will consider taking a client out of their slot or possible discharge from services. You would be notified by letter or by phone. My hours are generally Monday through Thursday 9 am to 5 pm. I do provide a few evening hours and occasional hours on Fridays as deemed appropriate. Please note that my hours may vary week to week.

Since I may not be available by phone I encourage people to leave a message. It is difficult for me return phone calls so I encourage you to make an appointment if issues need to be discussed.

Accountability:

I am a member of the *American Counseling Association* and the *National Board of Certified Counselors* and I abide by the code of ethics of these organizations. Information can be provided upon request. I encourage you to address any concerns directly with me. You also have the right to contact a legal advocate.

The practice of counseling in Maine is regulated by the *Department of Professional and Financial Regulation*, and complaints may be registered by contacting:

Board of Counseling Professionals
35 State House Station
Augusta, ME 04333
(207) 624-8626

The practice of counseling in New Hampshire is regulated by the *Office of Professional Licensure and Certification*, and complaints may be registered by contacting:

New Hampshire Board of Mental Health Practice
121 South Fruit Street, Suite 303
Concord, NH 03301
(603) 271-2702

By signing this I agree to these terms.

Client

Date

Amy Davenport Dakin, LMHC, LCPC, NCC

Date