

## PROFESSIONAL DISCLOSURE

Thank you for choosing to seek psychotherapy with me, Judi Daly, LICSW. This document is specifically for my clients, and not for the other mental health professionals providing services at this location. It provides you with my professional history/qualifications and informs you what constitutes unprofessional conduct as a Licensed Independent Clinical Social Worker, as per State of Vermont law.

**Qualification and Experience:** I am a Vermont Licensed Independent Clinical Social Worker, since 1988, license #089.0000186. I earned a Bachelor's of Science in Social Work in 1980 from the State University of New York, College at Brockport, and a Master's of Social Work from Adelphi University (Vermont Campus) in 1982. My professional history includes launching my career as a state of Vermont (DCF) child protection worker (then known as SRS) from 1983-1989. Having obtained a Clinical Social Work license, I became a mental health therapist first with University Associates in Psychiatry from 1989-1991, then with Community Health Plan from 1991-1995. I then worked as a clinical social worker for Casey Family Services from 1995-2012. I started this psychotherapy practice, Judi Daly LICSW, located at Counseling Connection, in January 2012. I keep office hours at this location on Tuesdays and Fridays. I provide psychotherapy services to adults, couples and families. I have received extensive continuing education in areas including: Solution-Focused Brief Therapy, Narrative Solutions in Brief Therapy, Adult mental health disorders, Complex developmental trauma in children, Childhood mental health disorders, behavioral issues, and treatment, Attachment issues, Impacts of trauma on parents and the family system, Attachment, Self-Regulation, and Competency (ARC) and Sensory Motor Arousal Regulation Treatment (SMART) for Childhood Trauma, Blended family issues, Supporting GLBT youth and parents, Child custody and permanency issues, Mediation, Family Group Decision Making, McGill Action Planning System (MAPS), social work ethics and Substance abuse issues. Additionally, I have been employed part-time by the University Of Vermont Medical Center since 2013, as a renal social worker, working with patients receiving dialysis. In this capacity, I have received training in and experience with Motivational Interviewing, Mindfulness, coping with chronic illness and end of life issues.

**Disputes/Complaints:** Please discuss any concerns you may have regarding your therapy or related issues directly with me at any time. I will make every reasonable effort to resolve your concerns in a satisfactory manner. If you believe I have treated you in an unprofessional manner (see below), you have the right to make a formal complaint with:

Vermont Secretary of State  
Office of professional Regulation  
89 Main Street, 3rd Floor, Montpelier, VT. 05620-3402  
(802) 828-1505

The Office of Professional Regulation provides Vermont licenses, certification and registrations for over 56,000 practitioners and businesses. Forty –six professions and occupations are supported and managed by the Office of Professional Regulation. A list of those professions can be found on the website for the Vermont Office of Professional Regulation, <https://www.sec.state.vt.us/professional-regulation/list-of-professions.aspx>

Upon receipt of a complaint, an administrative review determines if the issues raised are covered by the applicable professional conduct statute. If so, a committee is assigned to investigate, collect information, and recommend action or closure to the appropriate governing body. All complaint investigations are confidential. Should the investigation conclude with a decision for disciplinary action against a professional's license and ability to practice, the name of the license holder will then be made public.

Complaint investigations focus on licensure and fitness of the licensee to practice. Disciplinary action, when warranted, ranges from warning to revocation of license, based on the circumstances. You should not expect a

return of fees paid or additional unpaid services as part of the results of this process. If you seek restitution of this nature, consider consulting with the Consumer Protection Division of the Office of the Attorney General, retaining an attorney, or filing a case in Small Claims Court.

The Vermont Statutes Online, Title 26: Professions and Occupations, Chapter 61: Clinical Social worker §3210:

**Unprofessional conduct:**

- (1) Failing to use a correct title in professional activity;
- (2) Conduct that evidences unfitness to practice clinical social work;
- (3) Engaging in any sexual conduct with a client, or with the immediate family member of a client, with whom the licensee has had a professional relationship within the previous two years;
- (4) Harassing, intimidating, or abusing a client or patient;
- (5) Practicing outside or beyond a clinical social worker's area of training, experience, or competence, without appropriate supervision;
- (6) Engaging in conflicts of interest that interferes with the exercise of the clinical social worker's professional discretion and impartial judgment;
- (7) Failing to inform a client when a real or potential conflict of interest arises and to take reasonable steps to resolve the issue in a manner that makes the client's interest primary and protects the client's interest to the greatest extent possible;
- (8) Taking unfair advantage of any professional relationship or exploiting others to further the clinical social worker's personal, religious, political, or business interests;
- (9) Engaging in dual or multiple relationships with a client or former client in which there is a risk of exploitation or potential harm to the client;
- (10) Failing to take steps to protect a client and to set clear, appropriate, and culturally sensitive boundaries, in instances where dual or multiple relationships are unavoidable;
- (11) Failing to clarify with all parties which individuals will be considered clients and the nature of the clinical social worker's professional obligations to the various individuals who are receiving services, when a clinical social worker provides services to two or more people who have a spousal, familial, or other relationship with each other;
- (12) failing to clarify the clinical social worker's role with the parties involved and to take appropriate action to minimize any conflicts of interest, when the clinical social worker anticipates a conflict of interest among the individuals receiving services or anticipates having to perform in conflicting roles such as testifying in a child custody dispute or divorce proceedings involving clients;

(a) After hearing, and upon a finding of unprofessional conduct, an administrative hearing officer may take disciplinary action against a licensee or applicant. (Added 1985, No. 253 (Adj. Sess.), § 1; amended 1989, No. 250 (Adj. Sess.), § 4(b); 1993, No. 98, § 30; 1993, No. 222 (Adj. Sess.), § 6; 1997, No. 40, § 36; 1997, No. 145 (Adj. Sess.), § 52; 1999, No. 133 (Adj. Sess.), § 29; 2015, No. 38, § 31, eff. July 1, 2017; 2015, No. 138 (Adj. Sess.), § 7, eff. July 1, 2017.)

**Unprofessional Conduct:** As set forth in Title 3: Executive, Chapter 5: Professional Regulation, Sub-chapter 3: Professional Regulation, 3 VSA §129a,

(a) in addition to any other provision of law, the following conduct by a licensee constitutes unprofessional conduct. When that conduct is by an applicant or a person who later becomes an applicant, it may constitute the grounds for denial of a license or other disciplinary action. Any one of the following items, or combination of items, whether or not the conduct at issue was committed within or outside the state, shall constitute unprofessional conduct:

- (1) Fraudulent or deceptive procurement or use of a license.
- (2) Advertising that is intended or has a tendency to deceive.
- (3) Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession.

- (4) Failing to comply with an order of the board or violating any term or condition of a license restricted by the board.
- (5) Practicing the profession when medically or psychologically unfit to do so.
- (6) Delegating professional responsibilities to a person whom the licensed professional knows, or has reason to know, is not qualified by training, experience, education, or licensing credentials to perform them, or knowingly providing professional supervision or serving as a preceptor to a person who has not been licensed or registered as required by the laws of that person's profession.
- (7) Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing of reports or records or willfully failing to file the proper reports or records.
- (8) Failing to make available promptly to a person using professional health care services, that person's representative, or succeeding health care professionals or institutions, upon written request and direction of the person using professional health care services, copies of that person's records in the possession or under the control of the licensed practitioner, or failing to notify patients or clients how to obtain their records when a practice closes.
- (9) Failing to retain client records for a period of seven years, unless laws specific to the profession allow for a shorter retention period. When other laws or agency rules require retention for a longer period of time, the longer retention period shall apply.
- (10) Conviction of a crime related to the practice of the profession or conviction of a felony, whether or not related to the practice of the profession.
- (11) Failing to report to the office a conviction of any felony or any offense related to the practice of the profession in a Vermont District Court, a Vermont Superior Court, a federal court, or a court outside Vermont within 30 days.
- (12) Exercising undue influence on or taking improper advantage of a person using professional services, or promoting the sale of services or goods in a manner which exploits a person for the financial gain of the practitioner or a third party.
- (13) Performing treatments or providing services which the licensee is not qualified to perform or which are beyond the scope of the licensee's education, training, capabilities, experience, or scope of practice.
- (14) Failing to report to the office within 30 days a change of name or address.
- (15) Failing to exercise independent professional judgment in the performance of licensed activities when that judgment is necessary to avoid action repugnant to the obligations of the profession.
- (16)(A) Impeding an investigation under this chapter or unreasonably failing to reply, cooperate, or produce lawfully requested records in relation to such investigation.
- (B) The patient privilege set forth in 12 V.S.A. § 1612 shall not bar the licensee's obligations under this subsection (a) and a confidentiality agreement entered into in concluding a settlement of a civil claim shall not exempt the licensee from fulfilling his or her obligations under this subdivision (16).
- (17) Advertising, promoting, or recommending a therapy or treatment in a manner tending to deceive the public or to suggest a degree of reliability or efficacy unsupported by competent evidence and professional judgment.
- (18) Promotion by a treatment provider of the sale of drugs, devices, appliances, or goods provided for a patient or client in such a manner as to exploit the patient or client for the financial gain of the treatment provider, or selling, prescribing, giving away, or administering drugs for other than legal and legitimate therapeutic purposes.
- (19) Willful misrepresentation in treatments or therapies.
- (20) Offering, undertaking, or agreeing to cure or treat a disease or disorder by a secret method, procedure, treatment, or medicine.
- (21) Permitting one's name or license to be used by a person, group, or corporation when not actually in charge of or responsible for the professional services provided.
- (22) Prescribing, selling, administering, distributing, ordering, or dispensing any drug legally classified as a controlled substance for the licensee's own use or to an immediate family member as defined by rule.
- (23) For any professional with prescribing authority, signing a blank or undated prescription form or negligently failing to secure electronic means of prescribing.

(24) For any mental health care provider, use of conversion therapy as defined in 18 V.S.A. § 8351 on a client younger than 18 years of age.

Subdivision (a)(25) effective July 1, 2019.

(25) For providers of clinical care to patients, failing to have in place a plan for responsible disposition of patient health records in the event the licensee should become incapacitated or unexpectedly discontinue practice.

(b) Failure to practice competently by reason of any cause on a single occasion or on multiple occasions may constitute unprofessional conduct, whether actual injury to a client, patient, or customer has occurred. Failure to practice competently includes:

(1) Performance of unsafe or unacceptable patient or client care; or

(2) Failure to conform to the essential standards of acceptable and prevailing practice.

(c) The burden of proof in a disciplinary action shall be on the State to show by a preponderance of the evidence that the person has engaged in unprofessional conduct.

(d) After hearing, and upon a finding of unprofessional conduct, a board or an administrative law officer may take disciplinary action against a licensee or applicant, including imposing an administrative penalty not to exceed \$1,000.00 for each unprofessional conduct violation. Any money received under this subsection shall be deposited in the Professional Regulatory Fee Fund established in section 124 of this title for the purpose of providing education and training for board members and advisor appointees. The Director shall detail in the annual report receipts and expenses from money received under this subsection.

(e) In the case where a standard of unprofessional conduct as set forth in this section conflicts with a standard set forth in a specific board's statute or rule, the standard that is most protective of the public shall govern.

(Added 1997, No. 40, § 5; amended 2001, No. 151 (Adj. Sess.), § 2, eff. June 27, 2002; 2003, No. 60, § 2; 2005, No. 27, § 5; 2005, No. 148 (Adj. Sess.), § 4; 2009, No. 35, § 2; 2011, No. 66, § 3, eff. June 1, 2011; 2011, No. 116 (Adj. Sess.), § 5.)

**CLIENT'S DISCLOSURE CONFIRMATION:** I have read (or have had read to me) the information above and have discussed it where I needed clarification. I understand that this form, along with the other forms that constitute new client paperwork, are available to me online at the website <https://counselingconnectionvt.com/judi-daly%2C-licsw> or I can ask for a copy of these forms to be printed out for me. This information was given to me no later than my third office visit.

My signature acknowledges that I have been given the professional qualifications and experience of Judi Daly LICSW, a listing of actions that constitutes unprofessional conduct according to Vermont statutes, the method for making a consumer inquiry or filing a complaint with the Office of Professional Regulation and that I understand this notice of professional disclosure and my rights as a client of Judi Daly LICSW.

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Client (or guardian/authorized representative)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client (or guardian/authorized representative)

\_\_\_\_\_  
Date