

# John O'Brien, Psy.D.

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## DISCLOSURE INFORMATION

Colorado state law requires that I provide you with a disclosure statement outlining my credentials as a therapist and your rights as a client. If you have any questions about the material contained in this statement or about any aspect of your work with me, please ask.

**Education and Training:** I have Doctorate in clinical psychology (Psy.D.) from the California School of Professional Psychology at Alliant Int'l University in San Francisco, CA. In addition, I have a B.A. degree with a specialization in Psychology from Antioch University in Culver City, CA. I am a Psychologist Candidate, with Colorado PsyC permit number: 00014422

**Regulation:** The practice of licensed, certified, or registered mental health professionals is regulated by the Department of Regulatory Agencies ("DORA") Division of Professions and Occupations ("DOPO"). The Board of Psychologist Examiners regulates Licensed Psychologists, and can be reached at 1560 Broadway, Suite 1350, Denver, CO 80202, 303-894-7800.

Levels of regulation of mental health professionals in Colorado include licensing (requires minimum education, experience, and examination qualifications), certification (requires minimum training, experience, and for certain levels, examination qualifications), and registration (does not require minimum education, experience, or training.) All levels of regulation require passing a jurisprudence take-home examination.

As to the regulatory requirements applicable to specific mental health professionals: a Licensed Clinical Social Worker, a Licensed Marriage and Family Therapist, and a Licensed Professional Counselor must hold a master's degree in their profession and have two years of post-master's supervision. A Licensed Psychologist must hold a doctorate degree in psychology and have one year of post-doctoral supervision. A Licensed Social Worker must hold a master's degree in social work. A 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. A Certified Addiction Counselor I (CAC I) must be a high school graduate, and complete required training hours and 1000 hours of supervised experience. A CAC II must complete additional required training hours and 2,000 hours of supervised experience. A CAC III must have a bachelor's degree in behavioral health, and complete additional required training hours and 2,000 hours of supervised experience. A Licensed Addiction Counselor must have a clinical master's degree and meet the CAC III requirements. A Registered Psychotherapist is registered with the State Board of Registered Psychotherapists, is not licensed or certified, and no degree, training or experience is required. **I am a Psychologist Candidate.**

I am a candidate for licensure and am required to work under the supervision of a licensed mental

health professional. My supervisor will be monitoring the services that I provide to you and will have access to your mental health record. With your permission, I may occasionally video or audio tape our sessions for review by my supervisor; if this happens, we will discuss it beforehand and I will ask you to sign a consent allowing me to record the session(s). My supervisor will follow all of the policies outlined in this Disclosure Statement and in my Professional Services Agreement, including policies related to confidentiality. **My supervisor is a licensed psychologist: Trevor Graham, PsyD license number: PSY 3201**

**General Information:**

- As a client you are entitled to receive information about the methods of therapy, the techniques used, and the duration of therapy (if known), as well as the fee structure. You may seek a second opinion from another therapist or terminate therapy at any time. I ask that when you decide to terminate therapy that you discuss your decision with me and, if possible, do it within a session.
  
- In a professional relationship, such as ours, sexual intimacy is never appropriate and should be immediately reported to the board that licenses, registers, or certifies the licensee, registrant, or certificate holder.

**Confidentiality:** Generally speaking, information provided by you and to you during therapy sessions is legally confidential and cannot be released without your consent. Exceptions to this confidentiality, some of which are listed in Colorado statute 12-245-220, include the requirement that mental health professionals report child abuse to authorities. If a legal exception arises during therapy, if feasible, you will be informed accordingly. Additionally, your case may be discussed, without identifying information, in my consultation with colleagues.

If you have any questions or would like additional information now or at any time during our work together, please feel free to ask.

**I have read the preceding information, and I understand my rights as a client.**

Client name: \_\_\_\_\_

Client signature: \_\_\_\_\_ Date: \_\_\_\_\_

Therapist's signature: \_\_\_\_\_ Date: \_\_\_\_\_