

Robin Goldstein-Lincoln, MA, LPC, RPT

1200 28th Street, #301

Boulder, CO 80303

303-223-0727

Disclosure Statement

Policies:

My fee is \$150 for 50 minutes. My fee for phone consultations, paperwork requests, etc will be billed at \$3/minute. You can pay by cash, check or credit card. 24 hours notice is required for the cancellation of a scheduled appointment or you will be charged the full fee for the missed session.

Although I have a confidential voice mail service (303-223-0727), I listen to messages between 9 a.m. and 6 p.m. If you experience a life threatening emergency, please call 911 or proceed to the nearest emergency room. I use email for the purposes of scheduling only.

Disclosure Information

The state of Colorado Department of Regulatory Agencies requires that all psychotherapists inform you of the following information:

Contact Information

Robin Goldstein-Lincoln, Licensed Professional Counselor
1200 28th Street
Boulder, CO 80301
(303) 223-0727

Credentials

M.A. in Counseling Psychology; University of Colorado at Denver, 1996
M.A. in Curriculum and Instruction; University of Denver, 1994
B.A. in Psychology; University of Michigan, Ann Arbor, 1988

Additional Credentials:

Certified Synergistic Play Therapist and Supervisor; 2016
Certified EMDR Therapist; 2016
Registered Play Therapist Credential; 2013
Theraplay Trained, Level I; 2011
Hakomi Institute for Experiential Psychotherapy; 2007-2009
Licensed Professional Counselor; 2007-present

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 Examiners can be reached at 1560 Broadway, Suite 1350, Denver, Colorado 80202, (303) 894-7800.

Disclosure Information (continued)

As to the regulatory requirements applicable to mental health professionals: A Licensed Professional Counselor must hold a master’s degree in their profession and have two years of post-master’s supervision. I have been licensed in the state of Colorado since 2007 (license #4628).

Generally speaking, information provided by and to the client during therapy sessions is legally confidential and cannot be released without the client’s consent. There are exceptions to this confidentiality, some of which are listed in section 12-43-218 of the Colorado Revised Statutes. For example, mental health professionals are required to report suspected child abuse to authorities. The Mental Health Practice Act (CRS 12-43-101, et seq.) is available at : <http://www.dora.state.co.us/mental-health/Statute.pdf>.

If you would like me to confer with another healthcare professional, you will need to sign a “Release of Information” form. This permission can be revoked by you at any time.

In a professional relationship such as ours, sexual intimacy is never appropriate and should be reported to the board that licenses, registers, or certifies the licensee, registrant or certificate holder.

You are entitled to receive information from your therapist about methods of therapy, the techniques used, the duration of therapy (if known), and the fee structure. You can seek a second opinion from another therapist or terminate therapy at any time. There may be times when I may need to consult with a colleague or another professional about issues raised in therapy during which client confidentiality is still protected.

Additionally, I periodically videotape sessions for therapeutic purposes. Such videotapes will be stored with extreme care and respect to your confidentiality. You have the right to decline having your sessions videotaped.

If I believe your psychotherapeutic issues are outside my level of competence or scope of practice, I am legally required to consult, refer, or terminate therapy.

Consent: I have read the preceding information and I understand my rights as a client or as the client’s responsible party.

Print Client’s name (please print)

Client’s or Responsible Party’s signature (and relationship)

Date

Therapist’s signature

Date