

# Cassidy Erickson, LMFT

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Cassidy.S.Erickson@gmail.com

## Credentials

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Licensed Marriage and Family Therapist #1040

M.S., Human Development and Family Studies  
Auburn University, Auburn, AL 2008  
Option in Marriage and Family Therapy

B.S., Family and Consumer Sciences  
The University of Georgia, Athens, GA 2006  
Major in Child and Family Development

## Regulation of Psychotherapists

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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 Clinical Social Worker, a Licensed Marriage and Family Therapist, and a Licensed Professional Counselor must hold a Masters degree in their profession and have two years of post-Masters 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 Masters 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 Addictions Counselor I (CAC I) must be a high school graduate, and complete required training hours and 1,000 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 Bachelors degree in behavioral health, and complete additional required training hours and 2,000 hours of supervised experience. A Licensed Addictions Counselor must have a clinical Masters degree and meet the CAC III requirements. A Registered Psychotherapist is listed in the State's Database and is authorized by law to practice psychotherapy in Colorado, but is not licensed by the state and is not required to satisfy any standardized educational or testing requirements to obtain a registration from the state.

## Client Rights & Important Information

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- I am bound by the Code of Ethics set forth by the American Association for Marriage and Family Therapy (AAMFT). You can request a copy of those ethics at any time.
- You are entitled to receive information from me about my methods of therapy, the techniques I use, the duration of your therapy (if I can determine it), and my fee structure.
- You can seek a second opinion from another therapist or terminate therapy at any time.
- I will not provide therapy outside my scope of practice. This means that if it becomes clear that you need a different type of treatment, I will refer you to another therapist. If at any time I believe we have reached our full potential together, I may also refer you to another therapist.
- Sexual intimacy between a therapist and a client is never appropriate. If sexual intimacy occurs, it should be immediately reported to the board that licenses, certifies, or registers the therapist.
- 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:
  - I am required to report any suspected incident of child abuse or neglect to law enforcement;
  - I am required to report any threat of imminent physical harm by a client to law enforcement and to the person(s) threatened;
  - I am required to report suspected incidents of at-risk adult or elder abuse, exploitation, mistreatment, and/or self-neglect;
  - 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;
  - I am required to report any suspected threat to national security to federal officials; and
  - I may be required by Court Order to disclose treatment information.
  - I will notify you of any further legal exceptions as situations arise in therapy.
- There are two situations in which I will talk about part of your case with another therapist. When I am away from the office, I may have a fellow therapist "cover" for me. This therapist will be available in emergencies. Second, I regularly consult other therapists to ensure high-quality treatment. These persons are also required to

keep your information private. Your name or identifying information will never be given to them, and they will be told only as much as they need to understand your situation.

- When I am concerned about a client’s safety, it is my policy to request a Welfare Check through local law enforcement. In doing so, I may disclose to law enforcement officers information regarding my concerns. By signing this Disclosure Statement and agreeing to treatment with me, you consent to this practice, if it should become necessary.
- Under Colorado law, C.R.S. 14-10-123.8, parents have the right to access mental health treatment information concerning their minor children (under age 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.
- I agree not to record our sessions without your written consent, and you agree not to record a session or conversation with me without my written consent.

**Benefits and Risks of Treatment**

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As with any powerful treatment, there are some risks as well as benefits with therapy. There is a risk that clients will, for a time, have uncomfortable feelings. In adolescents, these uncomfortable feelings may lead to disruptive behaviors. Sometimes, a client’s problems may temporarily worsen after the beginning of treatment. Most of these risks are to be expected when people are making important changes in their lives. Finally, even with our best efforts, there is a risk that therapy may not work for you.

On the other hand, there are many benefits of therapy. Clients may find their depression or anxiety lifting, their anger dissipating, their coping and communication skills greatly improved, adolescent behavior improved, and relationships with themselves or others much stronger.

**Disclosure Regarding Divorce and Custody Litigation**

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If you are involved in divorce or custody litigation, my role as a therapist is not to make recommendations to the court concerning custody or parenting issues. By signing this Disclosure Statement, you agree not to subpoena me to court for testimony or for disclosure of treatment information in such litigation; and you agree not to request that I write any reports to the court or to your attorney, making recommendations concerning custody. The court can appoint professionals, who have no prior relationship with family members, to conduct an investigation or evaluation and to make recommendations to the court concerning parental responsibilities or parenting time in the best interests of the family’s children.

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*I have read the preceding information, and it has been presented to me verbally. I understand the disclosures that have been made to me. I also acknowledge that I have received a copy of this Disclosure Statement.*

_____ Client’s Printed Name	_____ Client Signature or Parent/Guardian Signature	_____ Date
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Cassidy Erickson, LMFT

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Date