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Professional Disclosure Statement/Informed Consent:

I've been working with Upper Valley youth in a variety of roles for over 15 years. Most recently I was the Student Assistance Professional at White River Valley Schools along with my English Shepherd 'True' who was a school therapy dog. I am working towards being licensed in clinical mental health counseling and alcohol and drug counseling. I have a Master's in Clinical Mental Health Counseling from Northern Vermont University and a Master's in Education from New England College.

I'm experienced at building safe supportive relationships with young people affected by familial substance use and trauma and helping young people learn effective strategies to cope with uncertainty and strong emotions. As we know, letting youth safely express themselves can help them process difficult experiences and move forward from them.

I have a person centered approach to counseling. I incorporate Cognitive Behavioral Therapy (CBT) techniques that focus on how our thoughts and feelings affect our behavior, and use Motivational Interviewing (MI), which helps a counselor understand a person's perspective and helps a person identify and act on behaviors they would like to change.

Appointments: Appointments generally are scheduled for 30-50 minutes depending on treatment goals.

Emergency Services: In the event of an emergency, call 911, or Clara Martin Center which is available to you 24 hours a day, 7 days a week. Their Emergency Hotline is **1-800-639-6360**

Payment: You will be expected to make payment arrangements for copays and out of pocket expenses with our billing office. It is your responsibility to call your insurance company and ask them about the behavioral health benefits and coverage of your insurance plan.

Professional Records: A chart of counseling sessions and goals will be kept throughout our time working together and will not be released without written consent.

Confidentiality: What is discussed in session is considered to be confidential and I am unable to disclose the contents unless it is an emergency or I have written consent to do so. There are a few times when confidentiality can be broken. There are as follows: If there is reason to suspect your child is being, or has been, harmed (abuse/neglect), is harming someone else, or intends to

harm themselves or others, if your child knows of someone else who is being harmed (abuse/neglect). I will always do my best to discuss any breaking of confidentiality with a child first.

Consultation and Supervision: I am working under the clinical supervision of Erica Fayrie, LCMHC, who is bound by the same standards of confidentiality. The goal of this supervision is to provide the most effective and helpful services to my clients and to be continually learning from others.

What to expect from counseling: Counseling is a process in which you work with a counselor in order to resolve problems and meet agreed upon goals. Counseling is not like a visit to a medical doctor. Rather, it calls for a *very active effort on the client's part*. In order for counseling to be most successful, the client will have to work on things that are discussed both during sessions and at home. Counseling can have risks and benefits. Counseling may involve discussing unpleasant aspects of one's life and they may experience uncomfortable feelings as a result. However, counseling has also been shown to help individuals resolve specific problems and reduce feelings of distress.

*****Please now go to <https://www.srhealthcenter.com/patient-forms>, fill out the **Counseling Client Intake Form** and then read and sign the **NLNC Signature Pager** stating that you read the below disclosure. If you are not already a patient of SRHC please fill out the **General Intake Form** and the **Health Questionnaire**.*****

Below you will find the Disclosure Document for Non-licensed and Non-certified psychotherapists form from the Vermont Board of Allied Mental Health. This document gives additional information about my experience, education and training and also provides you with rules governing my practice.

Office of Professional Regulation Notice

The Office of Professional Regulation provides Vermont licenses, certifications, and registrations for over 56,000 practitioners and businesses. Forty-six professions and occupations are supported and managed by this office. A list of professions regulated is found below.

Each profession or occupation is governed by laws defining professional conduct. Consumers who have inquiries or wish to obtain a form to register a complaint may do so by calling (802) 828-1505, or by writing to the Director of the Office, Secretary of State's Office, 89 Main Street, 3rd Floor, Montpelier, VT 05620-3402.

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.

Accountancy	Naturopaths
Acupuncture	Nursing
Architects	Nursing Home Administrators
Athletic Trainers	Occupational
Therapists Auctioneers	Opticians
Audiologists	Optometry
Barbers & Cosmetologists	Osteopathic Physicians and
Surgeons Boxing Control	Pharmacy
Chiropractic	Physical Therapists
Dental Examiners	Private Investigative & Security
Services Dietitians	Property Inspectors
Drug and Alcohol Counselor	Psychoanalyst
Electrolysis	Psychology
Professional Engineering	Psychotherapist, Non-
licensed Funeral Service	Radiologic Technology
Hearing Aid Dispensers	Real Estate Appraisers
Land Surveyors	Real Estate
Landscape Architects	Respiratory Care
Marriage & Family Therapists	Social Workers, Clinical
Clinical Mental Health Counselors	Tattooists
Midwives, Licensed	Veterinary
Motor Vehicle Racing	

Chapter 78: Roster of Psychotherapists Who Are Nonlicensed

§ 4090. Disclosure of Information

The board shall adopt rules requiring persons entered on the roster to disclose to each client the psychotherapist's professional qualifications and experience, those actions that constitute unprofessional conduct, and the method for filing a complaint or making a consumer inquiry, and provisions relating to the manner in which the information shall be displayed and signed by both the rostered psychotherapist and the client. The rules may include provisions for applying or modifying these requirements in cases involving institutionalized clients, minors and adults under the supervision of a guardian.

Title 3: Executive

Chapter 5: SECRETARY OF STATE

Sub-Chapter 3: Professional Regulation

**3 V.S.A. § 129a. Unprofessional
Conduct**

(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 person who later becomes an applicant, it may constitute grounds for denial of a license or other disciplinary action. Any one of the following items or any combination of items, whether 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 misdemeanor offense 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 that exploits a person for the financial gain of the practitioner or a third party.

(13) Performing treatments or providing services that the licensee is not qualified to perform or that 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, e-mail, or mailing 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.

(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.

(26) Sexually harassing or exploiting a patient, client, or consumer, or doing so to a coworker in a manner that threatens the health, safety, or welfare of patients, clients, or consumers; failing to maintain professional boundaries; or violating a patient, client, or consumer's reasonable expectation of privacy.

(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)(1) 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 \$5,000.00 for each unprofessional conduct violation.

(2)(A) Any money received under this subsection shall be deposited in the Professional Regulatory Fee Fund established in section 124 of this chapter for the purpose of providing education and training for board members and advisor appointees.

(B) 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; 2017, No. 48, § 4; 2017, No. 144 (Adj. Sess.), § 6, eff. July 1, 2019; 2019, No. 30, § 4.)

§ 4093. Unprofessional conduct

(a) Unprofessional conduct means the following conduct and conduct set forth in section 129a of Title 3:

- (1) Providing fraudulent or deceptive information in an application for entry on the roster.
 - (2) Conviction of a crime that evinces an unfitness to practice psychotherapy.
 - (3) Unauthorized use of a protected title in professional activity.
 - (4) Conduct which evidences moral unfitness to practice psychotherapy.
 - (5) Engaging in any sexual conduct with a client, or with the immediate family member of a client, with whom the psychotherapist has had a professional relationship within the previous two years.
 - (6) Harassing, intimidating or abusing a client.
 - (7) Entering into an additional relationship with a client, supervisee, research participant or student that might impair the psychotherapist's objectivity or otherwise interfere with his or her professional obligations.
 - (8) Practicing outside or beyond a psychotherapist's area of training, experience or competence without appropriate supervision.
- (b) After hearing, and upon a finding of unprofessional conduct, the board may take disciplinary action against a rostered psychotherapist or an applicant. (Added 1993, No. 222 (Adj. Sess.), § 17; amended 1997, No. 40, § 71; 1997, No. 145 (Adj. Sess.), § 61; 1999, No. 52, § 37.)