Professional Disclosure Statement



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lenore-senior.com and https://www.psychologytoday.com/

I am a licensed professional counselor licensed by the Wyoming Mental Health Professions Licensing Board. My license number is WY-LPC2177. I received a Bachelor of Arts in English from Hastings College in 1966. I received a Master of Arts in Community Counseling from Adams State College in 2004.

Modalities: As your counselor, I will treat you with respect as a unique individual. I generally use an eclectic range of modalities, including attachment theory, Gestalt, schema, trauma-informed, person centered, existential, and cognitive behavioral therapies, etc.

Referrals: In the event a more intensive level of care or treatment outside my scope of competence is warranted, I may provide you with a referral to another professional for those services.

Ethics: As a Licensed Professional Counselor, I follow the ethical rules and laws of my profession and the rules and regulations of the Wyoming Mental Professions Licensing Board and the Code of Ethics established by the rules and regulations of the American Counseling Association (ACA). These include but are not limited to rules governing standards of confidentiality, dual relationships, and the prohibition against sexual intimacy between counselors and clients. Sexual intimacy with a client is never appropriate.

The **Wyoming Mental Health Professions Licensing Board** regulates the practice of licensed persons in the field of counseling and other mental health professions in the State of Wyoming. Concerns or complaints regarding the practice of counseling may be directed to the licensing board and their contact information is provided below:

Wyoming Mental Health Professions Licensing Board 2001 Capitol Ave, Room 127 Cheyenne WY 82001

Phone: (307) 777-3628 or Fax: (307) 777-3508

The maintenance of confidentiality of all written or verbal communications between client and therapist:

As of March 1, 1999 Wyoming has implemented a privileged communication statute. This law states that, when involved in legal proceedings (civil, criminal or juvenile) clients retain the right to privacy, unless these specific circumstances exist:

- a) abuse or harmful neglect of children, the elderly or disabled or incompetent individuals is known or reasonably suspected
- b) the validity of a will of a former client is contested
- c) information related to counseling is necessary to defend against a malpractice action brought by a client

- d) an immediate threat of physical violence against a readily identifiable victim is disclosed to the counselor
- e) in the context of civil commitment proceedings, where an immediate threat of self-inflicted harm is disclosed to the counselor
- f) the client alleges mental or emotional damages in civil litigation or his/her mental or emotional state becomes an issue in any court
- g) the patient or client is examined pursuant to a court order
- h) in the context of investigations and hearings brought by the client and conducted by the board, where violations of this act are at issue.

"This disclosure statement is required by the Mental Health Professions Licensing Act."

I have read the above disclosure statement, understand what I have read, and voluntarily and knowingly executhis document subject to the above provision.	
Client Signature and Date	Therapist Signature and Date