

# Barstow Acres Children's Center



590 Main Street  
Prince Frederick, MD 20678

## DISCLOSURE AND POLICY STATEMENT

### THERAPISTS:

#### **Sonia Hinds, APRN, PMH-BC, RPT-S**

**Professional background:** I am a registered nurse with a master's degree in mental health nursing and a clinical specialist-psychotherapist. I have over 35 years of nursing experience. I am a native of Panama, Central America where I was born and raised. I completed a certificate program in child and adolescent psychotherapy at Washington School of Psychiatry. I am also a Registered Play Therapist Supervisor (RPT-S). I am the Founder and Executive Director for Barstow Acres Children's Center where I practice play therapy.

**Areas of specialization:** I work with children and families of all ages to help them overcome parent child conflicts, behavioral and anger problems, grief and loss, and other issues. I also work with adults experiencing wide range of socio-emotional problems. I am trained in Child-Centered and Gestalt Play Therapy, and Theraplay, Level One Practitioner.

#### **LaShann Freeman, M.Ed., LCPC, NCC, RPT**

**Professional background:** I am a Licensed Clinical Professional Counselor and a Registered Play Therapist committed to helping children, adolescents, adults and families build their inner confidence and resilience in a safe environment. I provide individual, group and family therapy to all ages for a wide range of social difficulties including but not limited to the effects of divorce, low self-esteem, tantrums, aggression, depression, anxiety, ADHD, past trauma, adjustments/transitions and family conflict. I also provide guidance to parents as part of healing the family system.

**Areas of specialization:** I specialize in Child Centered Play Therapy, Person Centered, Solution Focused, and Parental Consultation as well as an integrative approach to assist clients develop confidence, discover their unique strengths and build healthy relationships. I have over 7 years of experience working with children, adolescents and families in an educational setting as a Special education Teacher, in a residential facility as a counselor and in a therapeutic environment as a child psychotherapist.

#### **Rodney Roundtree Jr., Ed.D., NCC, LCPC**

**Professional Background:** I am a Licensed Clinical Professional Counselor and Certified School Counselor in the state of Maryland. I have over 10 years counseling experience working with children, adolescents and families. I received my doctorate degree in Counseling Psychology from Argosy University-Washington DC. I am also a National Certified Counselor. I have experience in school and clinical settings helping children and families improve behavioral, social, and academic outcomes.

**Areas of specialization:** I work with children, adolescents, and families to improve behavioral and emotional problems associated with ADHD, Oppositional Defiant Disorder, Conduct Disorder, Anxiety Disorder, and Adjustment Disorder.

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**Carrie Kochel, MA, LCPC, NCC**

**Professional Background:** I am a Licensed Clinical Professional Counselor (LCPC) and Nationally Certified Counselor (NCC). I am a graduate from Gallaudet University's Master of Clinical Mental Health Counseling program. I use an eclectic and expression-based approach to psychotherapy using a variety of expressive therapeutic approaches including art, music, and play to engage children, youth, and their families in treatment.

**Areas of specialization:** I provide individual, family, and group therapy to address a variety of presenting concerns including trauma, attention/focus, anxiety, depression, social skills, self-esteem, and attachment with children, adolescents, and their families.

**CONFIDENTIALITY:** All information provided by you during therapy is confidential unless you give us written permission to the contrary. As an exception, as required by law, we are legally obligated to report to authorities if there is clear and imminent danger to an individual, to society, to you, or if there is child abuse.

**TERMINATION:** You should have the right to terminate participation in therapy at any time, for any reason, and without penalty beyond the charges for missed appointments as mentioned. We encourage you to discuss with the therapist any desire to terminate therapy so that he/she might help you make the best decision for your welfare and bring closure to our work.

This information is required by the Board of Examiners of Professional Counselors which regulates all certified and licensed counselors and therapists.

DHMH Maryland Department of Health and Mental Hygiene  
4201 Patterson Avenue Baltimore, MD 21215-2299, Telephone 410-764-4732

Client's Name \_\_\_\_\_

Parent / Legal Guardian Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent / Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Records of Legal Guardianship Received (Y / N) \_\_\_\_\_ Date \_\_\_\_\_