

Informed Consent Agreement

Before beginning a counseling relationship with me, it is important for you to familiarize yourself with my approach to counseling, your rights and responsibilities, and my office practices. This agreement provides more detailed information that should help you understand and make informed choices regarding the process we are about to undertake.

Philosophy

The therapeutic work that I do combines elements of depth psychotherapy with principles of Eastern philosophy, working with both the spiritual and the embodied aspects of our lives. Mindfulness, wisdom and compassion help provide a grounded yet spacious container for the process of deeper self-understanding. There are times when the use of touch will be therapeutically appropriate, *but always with a clear explanation and the consent of the client.*

I view therapy as an intimate form of learning. In this sense counseling is a vehicle to assist people getting more out of life. I believe everyone can reach an optimum state of health. To achieve this I develop a partnership with clients, providing professional support that allows you to gain clarity and a deeper understanding of yourself and your relationship with others. I employ a wide range of effective skills and techniques with a strong reliance on experiential, presence-centered psychotherapy.

Education

I hold a Master's Degree in Counseling from Portland State University with an emphasis on Marriage and Family Counseling. Major coursework included: *Human Growth and Development, Multicultural Perspective, Career and Life-Style Planning, Testing and Appraisals, Ethics, Theory and Interventions, Human Sexuality, Couples and Family Systems, Couples Therapy, Family Lifecycle, and Interpersonal Relationships.* I am also a graduate of the *Hakomi Method*, a mindfulness-based approach to psychotherapy. I have taken workshops in *Jungian Psychology, Marital Conflict Resolution, Non-Pharmaceutical Interventions, Trauma, Internal Family Systems and Health/Nutrition.*

Assessment and Goal Setting

To provide the best possible counseling services, it is important for me to learn a number of things about you. In the initial one or two sessions, I will ask questions about why you want counseling now, what your past experience with counseling has been, what your use of alcohol and drugs is, and whether you have ever experienced mental health problems or received any mental health diagnosis. I will ask about your family-of-origin and current relationships, how you experience your daily life, and what is and isn't working in your life. I will ask what your hopes and dreams are for your life. Some of the questions may seem unrelated to the reason you are coming to see me, but your answers will help us jointly clarify the most effective way to address your concerns and help you be more alive, clear, happy, and healthy. In addition, I may ask you to fill out specific assessments or questionnaires that can also help in your healing and growth process.

After this process of assessment, we will jointly decide on a plan to help you address and resolve your concerns. This plan will focus on what you want to change or address, what our approach will be, and about how long our work together may take. We will revisit this initial plan periodically as we identify additional issues or goals and as you experience changes or questions.

Your participation is crucial to the quality of this process of exploration, growth and change, and to its outcomes. Your participation will involve exploring your present life and present moment, how you perceive and respond to the world, as well as ways your past influences your present. I will also support you in trying new behaviors and activities both during and in-between sessions. Throughout this process, please know that I welcome any feedback, questions, clarifications, or concerns. I invite you to speak up when you are confused or unhappy about anything I say, do or explore in sessions. I encourage you to let me know how counseling is going for you—and I will periodically ask you directly how you are feeling about the work and our relationship. Cultivating openness within the counseling relationship will help ensure your best interests are honored.

Risks to Counseling

Counseling is not without risk (as is true of many of life's opportunities). Some people experience an increase in feelings of stress, especially during the early stages of counseling. Some problems may seem to get worse before they get better. Exploring long-standing, deeply seated issues can sometimes initially seem to aggravate rather than help the issue, especially in couples and family counseling. Some people find themselves feeling emotions and having insights that are new and uncomfortable, sometimes leading to feelings of discouragement and thoughts of quitting counseling. Some people are surprised by how others in their lives respond as counseling progresses. These dynamics are natural and to be expected. You may also experience other unique consequences of counseling. I encourage you to talk with me about them as and if they occur.

Rights and Exceptions to Privacy

Our work together is confidential. What you choose to discuss with me is private and protected by federal and state laws. Except under unusual circumstances, discussed below, I will not share anything we talk about with others unless I have your written permission to do so.

Occasionally it will be helpful to exchange information with others, such as your physician, school or work personnel, or family members. If this happens, I will explain the rationale and discuss which information I believe should be shared. If you agree that I can share this information, then I will ask you to sign an Authorization to Disclose Personal Health Information (also known as a Release of Information) form. Similarly, I will not seek or accept information from others who know you without first receiving your permission. If there is specific information you believe would be helpful for me to know, particularly previous mental health treatment, please let me know as soon as possible.

It is important for you to know that some things, by law, can not be kept private. They include the following:

- (1) If I am subpoenaed or court ordered to testify in court, I may have to give information about you without your permission. If I am subpoenaed or receive a court order, I will make an effort to contact you. If you oppose release of information, a court may nevertheless order me to disclose information about you.
- (2) If I learn that you have harmed a child or elderly or disabled person, I will make a report to authorities.
- (3) If I learn that you intend to harm yourself, I will inform other people who can help you to protect yourself. I may inform family members, other health care providers or the police. Oregon law does not require me to report your intention to hurt another, but I reserve the right to tell that person if I believe they are in danger.
- (4) A non-custodial parent who wants to learn about their child's counseling may have the right to review their child's treatment record and to discuss their child's care with me.

These exceptions seldom occur, but it is nonetheless important for you to be aware of them. I encourage you to talk to me about any concerns related to privacy at any time in our work.

Privacy is also an issue in working with children and adolescents and in family and couples counseling. With children and adolescents and family work it is important to respect the need for some individual privacy, while also identifying issues to be addressed by the whole family. In couples counseling the client is actually the relationship itself, so individual privacy needs must be balanced with the need for openness within the relationship.

As a Registered Intern of the Oregon Board of Licensed Professional Counselors and Therapists I will abide by the Code of Ethics. I am under the ongoing supervision of Rick Johnson, Ph.D, Director of the Counseling Program at Portland State University.

As a client of a Registered Intern you have the following rights:

- ❖ To expect that a licensee has met the minimal qualifications of training and experience required by state law;
- ❖ To examine public records maintained by the Board and to have the Board confirm credentials of a licensee;
- ❖ To obtain a copy of the Code of Ethics;
- ❖ To report complaints to the Board;
- ❖ To be informed of the cost of professional services before receiving services;
- ❖ To be assured of privacy and confidentiality while receiving services as defined by rule and law, including the following exceptions: 1) Reporting suspected child abuse; 2) Reporting imminent danger to client or others; 3) Reporting information concerning licensee case consultation or supervision; and 5) Defending claims brought by client against licensee;
- ❖ To be free from being the object of discrimination on the basis of race, religion, gender, or other unlawful category while receiving services.

You may contact the Board of Licensed Professional Counselors and Therapists at:

**Board of Counselors and Therapists
3218 Pringle Rd SE #250
Salem, OR 97302-6312
(503) 378-5499**

Counseling Alternatives

Although I cannot guarantee any particular outcome from counseling, I will work with you professionally and ethically and do my best to provide effective counseling that meets your unique needs. However, I am not able to meet all of my clients' counseling needs all the time. If I determine that I can not adequately help you, I will tell you at the earliest opportunity and assist you in finding more appropriate services. This could include referral to another counselor, therapist, a hospital inpatient program, or a substance abuse program. Other types of referrals may also be called for. If you at any time have doubts about our work together, please talk to me about your concerns.

Legal Proceedings and Court Involvement

If you are involved in or anticipate being involved in legal or court proceedings, please let me know as soon as possible so I can understand if and how this may affect our work together. If you are looking for an evaluation regarding a legal proceeding, I will refer you to a provider who offers that service, as I do not.

I will also not be a party to any legal proceedings against current or former clients. By entering a counseling relationship with me, you are agreeing not to involve me in legal or court proceedings or seek counseling records for legal or court proceedings when marital or family counseling has not been successful in resolving disputes. This prevents misuse of your counseling for legal objectives.

If you require my testimony or involvement in non-adversarial aspects of legal or court proceedings, I will do so only with your consent. I will be unable to disclose any information pertaining to other family members or parties in counseling without their specific consent.

Appointments, Cancellations and Ending Counseling

Our sessions will be by appointment and be 50 minutes long. Please call within at least 24 hours of your scheduled appointment if you need to cancel or reschedule. You are responsible for the full fee for appointments missed without adequate notice. My voice mail will take your message 24 hours a day. You can find my phone number on my business card.

It is possible to have limited contact via email, but you will need to sign an email agreement before we can communicate this way. Please let me know if you are interested in email communication.

You may terminate counseling at any time. I do encourage you to discuss your thoughts and inclinations to discontinue before acting, however, so that we may explore the issues and bring closure to the work to date.

Payment and Billing

Please pay for each session at the beginning of each visit based on my fee scale by way of check, money order or cash. I do not accept prepayment or credit card for services. If circumstances prevent you from paying at the session, please mail payment before the next session. I do not currently accept insurance payment.

Fee

\$50 per 50 minute session, individual
\$65 per 50 minute session, couples
(limited sliding scale available)

Agreement and Consent for Counseling

I have read this document and have had the opportunity to ask questions about it. I understand my rights to privacy, the exceptions to my rights to privacy, and that there are risks associated with counseling. In the event that a minor child is receiving counseling, I give my consent for these services and affirm that I am the legal guardian with the authority to authorize health care services. I agree to abide by the payment policy outlined above and accept full responsibility for any and all fees incurred for my counseling or, if appropriate, counseling for my child(ren).

Client's Signature

Date

Counselor's Signature

Date