

Professional Disclosure Statement

As your professional counselor I am committed to providing the highest quality of care to meet your specific needs. I am trained as a marriage and family therapist, and tend to a “systems” theoretical orientation. Your perspective, within your history of relationships will be the basis of my therapeutic approach. I will assist you in identifying and expressing emotions in a safe setting, support you in decision-making, teach skills to improve your personal relationships, and enable you to clarify factors from your past which may be hindering your growth in the present. I incorporate cognitive therapy, behavior modification, communication skills building, role-playing, journaling, and homework assignments in therapy sessions.

Education and Training:

LPC Licensed Professional Counselor, Oregon LPC # C123-1 (Feb.1999)

Master of Arts, Marriage & Family Therapy, Graduate School of Psychology, Fuller Theological Seminary, Pasadena, CA (June 1988)

B.A. Bachelor of Arts, Psychology, Society and Justice, University of Washington, Seattle, WA
Certified Clinical Trauma Professional (2019)

As a Licensed Professional Counselor, I adhere to the Code of Ethics of the Oregon Board of Licensed Professional Counselors. My primary professional responsibility is to you, my client. I will make every effort to provide resources to you, to seek appropriate counsel if needed or requested by you. I adhere to all laws regarding confidentiality and reporting of abuse as required by the State of Oregon. I adhere to Telehealth guidelines as specified by the State of Oregon. I will not deny services to you on the basis of race, religion, sex, political affiliation, social status, or choice of lifestyle. I will refer you to another counselor if, and whenever, my objectivity may be impaired. I respect your ability and responsibility to make decisions for your personal welfare. I will ensure that duality of relationship does not occur between us, and I will not exert undue influence at any time over you. I will provide reasonable access to records that concern you. I will not perform professional services beyond my field of competence.

As my client, you have the right to expect that I have met qualifications of training and experience required by state law, to examine public records maintained by the Board and to have the Board confirm my credentials, to obtain a copy of the Code of Ethics, to report complaints to the Board, and to be informed of the cost of professional services before receiving services. You also have the right to be assured of privacy and confidentiality while receiving services as defined by the law. Exceptions to confidentiality include that I must report suspected abuse or imminent danger to client or others, and I must provide information required in court proceedings, or with insurance companies or other relevant agencies, information concerning case consultation or supervision, and defense of any claims that may be brought against me, in compliance with HIPAA. I comply with continuing education and supervision requirements as mandated by the Oregon Board of Licensed Professional Counselors and Therapists, obtaining a minimum of forty clock hours of applicable training every 24 months of licensure. My fee schedule is \$175 per fifty minute session. I accept fee schedules of insurance companies with whom I provide services. The Oregon Board of Licensed Professional Counselors & Therapists may be contacted at (503) 378-5499, FAX (503) 470-6266, lpct.board@oregon.gov.