

# Professional Disclosure Statement

Deborah Orandon, MS, LMT #R1426

## Self-Awareness Counseling

7409 SW Capitol Hwy Suite 207

Portland, OR 97219

(503)729-9662

Welcome to Self-Awareness Counseling, a private counseling practice offering individual and group counseling services to adults & Adolescents. Please read the following document carefully and feel free to discuss any questions you have with me, before you sign. This document will inform you about my background, counseling approach, fees and your rights and responsibilities as a client. Its purpose is to help you make an informed decision about entering into the counseling process with me.

### Philosophy and Approach

Sometimes in life, we feel "stuck", finding it difficult to make the kinds of changes we would like in our lives. It is my belief that we all hold a myriad of untapped resources within us, which if drawn upon, can help us create these changes. Often our life circumstances haven't helped us develop the abilities needed to effectively put these resources to work. My objective as a counselor is to help you (or your child) develop these strengths so that you can make the changes you want.

My work centers around helping you deepen your awareness of the unique way you experience yourself, others and the world. Doing this can help you understand your feelings and actions, and learn to access and organize your innate resources towards health, growth and positive change. My role as a counselor is to provide structure, support and tools for increasing your awareness so that you can make and integrate effective life change.

My approach integrates Humanistic, Existential, Interpersonal and Psychodynamic theoretical orientations with experiential, mindfulness & body psychotherapy techniques drawn primarily from Hakomi, Internal Family Systems, Gestalt and Caldwell's Moving Cycle. When appropriate I also incorporate solution-focus approaches and techniques drawn from Cognitive-Behavioral and Dialectic Behavioral Therapies.

This means that the counseling process with me will involve attending to the collaborative quality of the client-therapist relationship as we work together to deepen your understanding of core issues, and discover and adapt the tools that are best suited to your individual needs and goals.

### Formal Education & Training

I earned a Master of Science degree in counseling with a community counseling specialization from Portland State University in 2008. This program is accredited by the Council for Accreditation of Counseling and Related Programs (CACREP). I earned a Bachelor of Science degree with a double major of Dance and Psychology from Western Oregon University in 2003 and I am an Oregon Licensed Massage Therapist (#6176). I have one year of training in the Hakomi Method of Body-Centered Psychotherapy/Re-Creation of the Self model of Human Systems (2004-2005) and have completed modules I & II in Internal Family Systems (2010-2011). I have additional coursework in addictions counseling and marriage and family counseling and am currently enrolled in the Addictions Counseling and the Couples, Marriage and Family Graduate Certificate

programs in the Continuing Education Program in the Graduate School of Education at Portland State University.

### **Supervision & Ethics**

As a Registered Intern of the Oregon Board of Licensed Professional Counselors & Therapists, I am under the ongoing supervision of Donna Roy, LPC. She can be reached at: (503) 450-9919. I will be happy to discuss any details of the supervision process with you.

I conduct my practice in accordance with the Oregon Licensing Board's Code of Ethics set forth in OAR chapter 833, division 60, and that of the American Counseling Association (ACA), the National Board for Certified Counselors (NBCC), as well as the ethical code of the United States Association of Body Psychotherapy (USABP) You can read these ethical standards in detail at the following web sites:

Board of Licensed Professional Counselors and Therapists

[http://arcweb.sos.state.or.us/rules/OARS\\_800/OAR\\_833/833\\_060.html](http://arcweb.sos.state.or.us/rules/OARS_800/OAR_833/833_060.html)

ACA

<http://www.counseling.org/Resources/CodeofEthics/TP/HOME/CT2.aspx>

NBCC

<http://www.nbcc.org/extras/pdfs/ethics/nbcc-codeofethics.pdf>

USABP

<http://www.usabp.org/associations/1808/files/USABPethics.pdf>

### **Client Rights**

*As a client of an Oregon Licensee or 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 the 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 required in court proceedings or by client's insurance company, or other relevant agencies;
  - 4) Providing 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: 3218 Pringle Rd SE #250, Salem, OR 97302-6312 (503) 378-5499.

### **Fees & Cancellation Policies**

- ❖ I charge a fee of \$85 for a 50-minute session, longer sessions are available & pro-rated. I see a limited number of sliding scale fee clients, starting at \$65 for a 50-minute session. Sliding scale fee is determined by gross household income and number of dependants.

- ❖ You, the client, are responsible for payment of all fees. Fees are due at the beginning of each session, payable by cash, check or money order. Failure to pay a session fee may lead to an immediate rescheduling of that appointment.
- ❖ I do not accept insurance payment but can provide you with a receipt that may allow you to file an insurance claim for your session.
- ❖ Periodically my business undergoes a fiscal review and sometimes it is necessary to increase fees. All clients will be given no less than a three month notice of fee increases. If it is determined that the fee increase will prohibit the continuation of counseling services with me, I will refer you to another provider.
- ❖ **Cancellation/lateness policy: I require 24 hours notice by telephone or voicemail, for cancellation of a scheduled appointment, otherwise the full fee for the session is due. Cancellation notice by email is only accepted if receipt of email is confirmed 24 hours before the appointment time. **I do not use text messaging service.** You are responsible for keeping appointments and arriving on time. Typically session time will not be extended due to late arrival.**
- ❖ ***Alcohol & Drug Policy:*** Please do not use alcohol or drugs before your counseling appointment, as they interfere with the counseling process. I reserve the right to terminate a session if it becomes evident that you are under the influence. The full fee will be charged for the terminated session.

**Hours and Availability**

I am available by appointment only and will not conduct walk-in sessions. This insures that your sessions will be uninterrupted. I generally see clients between the hours of 12-6pm M-F, unless other arrangements have been made.

My business phone number is: (503)729-9662.

If I am available, I will try and answer phone calls. However, I am often in session or otherwise occupied so please leave a message if I do not answer (please include your phone number even if you think I already have it). I try and return all phone calls within 24 hours, but this may not always be possible.

Please note that I am not equipped to provide emergency mental health services. If you need an immediate response please call a 24-hour crisis line.

**Multnomah County Crisis Line: (503) 988-4888.**

**Washington County Crisis Line: (503) 291-9111.**

**If you need immediate assistance, please call 911.**

I have read, understand, and agree to the Self-Awareness Counseling policies and terms as outlined above. I have had the opportunity to have my questions answered and understand the limits to confidentiality.

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