

## **Professional Disclosure Statement and Informed Consent**

Kristin Lanning, LPC

11825 SW Greenburg Rd. Suite 201 • Tigard, OR 97223 • 971-238-7449

kristin@kristinlanningcounseling.com • kristinlanningcounseling.com

---

Hello and welcome! My services, approach, and policies are outlined below, and all clients are given and asked to sign a copy of this document at the beginning of treatment to indicate their understanding and acceptance of my policies.

### **What to expect:**

Our sessions are around 45 minutes, and we will typically meet weekly or biweekly. When things are going well and we've been meeting for a while, we might go down to meeting monthly or even quarterly to support your progress. I do not require clients to commit to weekly slots and like to tailor our meeting frequency to meet your needs. The frequency of our sessions and the total number of sessions will vary depending on your specific needs, availability, and progress.

Our first session is an initial assessment, which focuses on information gathering and I will ask a lot of questions to make sure I have a clear picture of what's going on. I keep notes during this session to make sure I don't forget the details. After the first session, my style is much more conversational and we will have more time to go in-depth into specific concerns.

### **Cost and insurance:**

My fee is \$140 per individual session, and \$160 for initial assessments and family sessions. I am in-network with several insurance companies, and can also submit claims for you as an out-of-network provider. You are responsible to pay what your insurance company does not cover. Keep in mind that many insurance plans require you to meet a deductible before services are covered, so it's a good idea to check your benefits so you know what to expect.

### **Contacting me outside of session time:**

I am not "on call" for crisis situations outside of session time and do not provide counseling via phone, text, or email. Some clients choose to send me a message if there are significant updates or concerns. I may respond briefly, but will save more detailed discussions for our session time. These messages become part of your clinical record, and although I take appropriate precautions to keep things private, things sent via phone or internet are vulnerable to security breaches.

If things are not going well and you want to meet sooner than your scheduled appointment, please log-in to my client portal and request a sooner session time. You can also text me or leave me a voicemail with updates, but please keep in mind that it can take me up to 48 hours to get back to you. I may be able to squeeze you in somewhere even if there is no space listed on the client portal.

### **Cancellations:**

If you need to cancel your appointment, you can use my client portal to cancel and request a new time, or you can send me a text and I will respond typically within 48 hours. If you arrive late or cancel our appointment, your appointment may be shortened or delayed due to restrictions in my schedule or yours. Since I reserve your appointment slots specifically for you, my policy is to charge a \$60 fee if you no-show or cancel your session without 24-hour notice. I will either charge this to your credit card on file, or add it to your balance to be paid next session.

### **Our relationship and boundaries:**

It is important for your treatment that our relationship is therapeutic and professional, and I put boundaries in place to protect this. This includes not accepting gifts or trades, not entering into business or personal relationships with clients, and minimizing contact outside of my office. If we happen to encounter each other outside my office, my policy is to respect your privacy and not approach you. I also do not engage with clients via social media.

**Confidentiality:**

The work we do together is confidential and can only be shared with your consent. There are a few, specific exceptions to this, which are listed below in the Bill of Rights section.

**My training and approach:**

I have a Master's degree in Clinical Mental Health Counseling from George Fox University, with classwork including counseling skills and theory, human development, psychopathology, and trauma response. As a licensee of the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its Code of Ethics. As required by the board, I participate in continuing education in topics relevant to my counseling practice.

I believe that our work together should be tailored to your unique personality, needs, and challenges. My goal is for clients to feel supported, gain new insight, and find realistic ways to overcome challenges. To accomplish this, I use a variety of approaches including person-centered therapy, cognitive-behavioral therapy, motivational interviewing, Brainspotting, and Collaborative Problem Solving.

**Benefits and risks:**

Potential benefits of therapy may include improvement in emotional and behavioral struggles, progress towards your goals, and general personal growth. You will have the opportunity to "talk things out," which can lower stress and decrease mental health symptoms. You may notice growth in your relationships, functioning, and ability to cope.

There are potential risks to therapy, as change and growth can be a difficult process. These might include experiencing uncomfortable levels of emotions, recalling unpleasant parts of your history, or increased conflict with family members as we address difficult issues. If you are experiencing these, please let me know so we can address it together.

**Minors and confidentiality:**

I encourage parents of minors to be involved in treatment when it is clinically appropriate, as communication and consultation with parents can be a helpful part of treatment. Typically this means that I check in with parents at the beginning or end of sessions to ask about their concerns and discuss general themes and progress in therapy. However, that does not mean that I will share with parents 100% of what their child discusses with me, as it is important for kids and teens to have a safe space to share vulnerable thoughts and feelings. If you have concerns regarding this policy, please discuss them with me at the beginning of our work together.

My primary role as a therapist is to address mental health and behavior issues, and I do not offer or specialize in parenting evaluations or child custody determinations. If you are looking for these services, I can refer you to other providers who may be able to assist you. If I am called into court regarding your case, I charge \$200 per hour which includes travel time and time spent on court-related matters. These fees are not covered by insurance.

**Crisis situations:**

If you are in crisis and need immediate response, please keep me updated, but do not wait for me to get back to you before seeking help. Please call your local county crisis line (for Washington county: 503-291-9111) or 911. Washington County also has a free crisis walk-in center that can provide crisis assessment and intervention 7 days a week, 9am - 8:30pm (Hawthorn Walk-in Center - 5240 NE Elam Young Parkway Suite 100 in Hillsboro).

**Termination:**

Ideally, we will decide together when treatment is complete, and will plan for this weeks in advance to ensure you are comfortable reducing or ending our time together. There are other times that either of us may decide not to continue treatment. This might include: if I believe I am not the right person to meet your needs, if I believe my services are no longer beneficial or necessary for you, or if you cancel your appointment and do not reschedule. Unless we have a previously discussed plan, **my policy is to close your file and consider our work together ended if I do not hear from you for sixty days.** If needed, I would be happy to refer you to other providers who might better meet your needs.

I maintain your records for 7 years after our last session. In the unlikely event that I die or become incapacitated within that time, your records will be secured by Sharon Hale, LMFT, who can provide copies of your records at your request.

**Bill of Rights:**

As a client of an Oregon Licensed Professional Counselor, you have the following rights as established by the Oregon State Board of Licensed Professional Counselors and Therapists (OAR 833-60-001):

- To expect that a licensee has met the minimum 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 service before receiving them;
- To be assured of the privacy and confidentiality while receiving services as defined by rule and law, with the following exceptions: Reporting suspected child abuse; Reporting imminent danger to client or others; reporting information required in court proceedings or by the client’s insurance company, or other relevant agencies; providing information for licensee case consultation or supervision; and defending claims brought by the client against licensee.
- To be free from discrimination on the basis of race, religion, gender or other unlawful category while receiving services.

Board contact information:

3218 Pringle Road SE #120, Salem, OR 97302 **Phone:** 503-378-5499 **Email:** lpct.board@oregon.gov

For additional information about this counselor, consult the Board’s website at [www.oregon.gov/OBLPCT](http://www.oregon.gov/OBLPCT)

**By signing below, you acknowledge that you have received and understand this document, and agree to treatment conditions as described above.**

_____	_____
Client	Date
_____	_____
Parent/Guardian	Date
_____	_____
Parent/Guardian	Date
_____	_____
Therapist	Date