



Spirit and Logic, Inc.
Person-Centered Counseling
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PROFESSIONAL DISCLOSURE STATEMENT

Background Information:

Welcome! I am **Chera Sabankaya**, horse behaviorist of 30 years, National Certified Counselor, recent Summa Cum Laude graduate of Southern Oregon University's Masters in Mental Health Counseling Program, and member of AMHCA (American Mental Health Counselors Assoc), ORCA (Oregon Counseling Assoc), and ACA (American Counseling Assoc). Although this document may appear long and complex, it is very important that we read it together carefully before beginning treatment. I encourage you to ask any questions that arise, either now or during the course of treatment. It is my goal to provide you with the highest quality of psychological services possible.

My approach: I call my approach to counseling "Spirit and Logic," with *spirit* representing my compassionate belief that no living being is innately bad, and *logic* referring to my duty as a caregiver to continually educate myself and my clients on the developing science of the body/behavior-mind/thought connection. I have a minor in criminology and have counseled adults and minors on probation and minors detained in the juvenile hall with career choices, addiction relapse prevention, life skills, and reintegration into the community. I have also helped minors and their families deal with many types of challenges from July 2010 through September 2011 at Siskiyou County Behavioral Health Children's System of Care. I am currently seeing you through my private practice, Spirit and Logic, Inc. as a primary care therapist. It is important for you to know that I am not, yet, licensed, but my work with you helps me acquire the necessary hours I need to become licensed. In addition to acquiring hours, two other requirements for licensure are that I register with licensing boards and receive supervision from qualified therapists within each state that I practice as a therapist. I am currently registered with the Oregon Board of Professional Counselors and Therapists as an LPC intern (Licensed Professional Counselor). As a registered intern with this licensing board, I will abide by its Codes of Ethics and maintain clinical supervision with Maria Connolly, MS, LPC of Ashland, Oregon (see contact info below).

What types of clients do I see? Although I work with clients experiencing various psychological conditions, including depression, bipolar, PTSD, ADHD, and anxiety, I also see clients facing challenging life circumstances, such as divorce, blended/atypical families, grief, and chronic pain. I see clients and their family members of all ages in individual, group, couples, and family settings.

Counseling Style: My natural style of counseling can best be described as the Person-Centered Model of psychotherapy, which means I believe that 1) we all have within us the desire and capacity to flourish mentally, physically, and spiritually, and 2) the main cause of anxiety is incongruence, which happens when we behave in ways that please others rather than ourselves. My goal is not to treat you as an ill patient, but to work with you as a partner, providing you with a safe space in which to explore the deep, underlying feelings and beliefs that have blocked you from reaching your full potential and developing

fulfilling connections with others. I value our relationship and consider it a privilege to share this journey of your life with you. As needed, and with your consent, I sometimes like to branch out into other therapeutic models, such as Existential, Gestalt, Experiential, Art, Play, and Narrative Therapies, but please keep in mind that *you always have the right to refuse participation* in any activity.

The Nature of Our Relationship

Although you will be sharing personal things with me during the course of our working relationship, the tie between us is professional. In order for me to best help you, our relationship must remain professional. This means that if I see you outside of counseling, (i.e., at the grocery store) I will not approach you to socialize because it is my responsibility to protect your confidentiality. It also means that I will not “befriend” you on Internet social networks. Please do not take this personally, as it does not mean that I do not like you or enjoy your company.

Groups and Family Counseling: Should you choose to become a member of my group or family counseling experiences, your right to privacy is extremely important to me. It is important to note, however, that unlike individual counseling, where a client’s confidentiality can be insured by the counselor, the insurance of privacy in group counseling can only be provided by each group member’s commitment to maintaining group confidentiality. To that end, I will create group norms during our initial meeting and throughout the duration of the group to address group concerns in this area. Also, as mentioned above, I will be supervised, and at times may consult with other professionals about our group or family work. In these instances, *I will not use names* and will continue to respect all members’ privacy as much as possible.

The duration of counseling...

How long is each session? Our sessions are typically one therapeutic hour, which equals 50 minutes, but may be longer or shorter depending upon the nature of the work we are doing together. This is because I believe it is important to customize each session to your needs. For example, if you are in the midst of exploring deep, emotional feelings, we may both agree to use an extra 30 or 50 minutes of session time to protect and support the flow of thought and allow you to recover emotionally before leaving the session. We may also decide to hold our sessions outside of the office, perhaps at a community location such as a park, your school or college, the juvenile hall, jail, or your home. These field locations require extra time for the commute to and from the office. The third possible reason for an extended session would be the preparation and clean up of an experiential or art activity. We will discuss in advance how long each session will be.

How often and how many sessions will you have? It is preferable that you see me at least once per month for the duration of our therapeutic relationship, but the frequency and number of sessions will be customized to meet your individual needs and availability. The goal of counseling with me is that you will develop a sense of emotional stability and self-acceptance and set attainable goals for the future. For some clients this may take one session per week for three months, while for others it may take a combination of office visits and telephone check-ins for several months—it all depends.

Goals, Risks, and Benefits: There may be psychological side effects that can come with any form of counseling. There are many different approaches to counseling, each having its own risks and benefits. You may share painful things with me in individual sessions or with others in group or family sessions. My goal is to address these issues within our sessions. With time, I hope these potential side effects will lessen and our work together will benefit you. It is important that we talk about how you experience our work together.

Client Responsibilities...

Changing an appointment: To receive the most benefit from counseling, it is important that you actively participate in the process. This requires that you arrive on time to your appointments. When

this is not possible or a session must be cancelled, please notify me at least 24 hours in advance. If possible, we will reschedule for another time. If you need to reschedule an appointment, call or text me at (530) 859-3155 (the voicemail on this line is confidential). You can also email me at Chera@spiritandlogic.org. I cannot promise to be available at all times. Because there are other clients who may want to get in to see me, I can usually offer your cancelled appointment to another client as long as you give me at least 24 hours notice. When you fail to cancel your appointment 24 hours ahead of time, I will not have time to give your session to another client, therefore you will be responsible to pay for one therapeutic hour's worth of the missed session.

Paying for counseling: Payment is due at the time of the session. The cost for a therapeutic hour (50 mins) is typically between \$80-\$120, but I do sometimes make special arrangements with some clients. For example, in the event a client experiences a financial hardship during the course of treatment, I may be in a position to offer my services at a discounted rate that the client can afford, also known as a "sliding scale" fee. And, as part of my philanthropic commitment to my community, I also reserve one space in my caselist to provide counseling free of charge to someone who could not otherwise afford treatment at all. If you happen to fall into this category, be sure to ask me if this space is available when you call to make your appointment. Even if you do not happen to be experiencing financial difficulties, there are other ways you can save money on your counseling fees. One way is to commit to a package of four or more sessions by paying for them upfront. I will discount your hourly rate by 10% if you pay for your treatment in advance. Professional time spent outside of coaching sessions, including, but not limited to, between-session phone consults, report writing, and reading or reviewing documents, will be billed on a prorated basis rounded up to the nearest tenth of an hour. If I am required to attend meetings outside of my offices, you will pay for all time I spend traveling to the location of such meetings.

Regarding insurance, I am not an in-network provider for any insurance companies, yet, that does not necessarily mean I cannot bill your insurance company. We can discuss this matter when you call me to arrange for your first appointment. Should your policy lapse, you could be held responsible to pay out of pocket for the cost of your treatment, including but not limited to face-to-face sessions and plan developments or consultations with other treatment providers and time spent commuting or preparing for sessions at a rate of \$80 per hour. I will do my best to check your insurance coverage periodically between sessions, but I cannot promise that I will do this before each session. For this reason, it is important for you to keep your insurance coverage up to date while seeing me.

Client Rights

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

- To expect that a licensee/intern has met the minimal requirements of training and experience required by state law;
- To examine public records maintained by the Boards and to have the Boards confirm credentials of a licensee;
- To obtain a copy of the Boards' Codes of Ethics;
- To report complaints to the Boards;
- 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 required in court proceedings or by client's insurance company, or other relevant agencies; 4) Providing information

concerning licensee/intern case consultation or supervision; and 5) Defending claims brought by client against licensee/intern;

- To be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.
- You may contact:

- **The Oregon Board of Licensed Professional Counselors and Therapists at 3218 Pringle Road Suite #250, Salem, OR 97302. Tel: (503) 378-5499**
Email: lpct.board@state.or.us Website: www.oregon.gov/OBLPCT

- My OBLPCT Supervisor, **Maria Connolly, MS, LPC (Lic #C1762) at (541) 973-9673**

Your Right to Privacy: You have certain rights as a client and as a consumer of my counseling services. You have a right and a limit to privacy. Generally speaking, information provided by a client during counseling sessions with a registered intern counselor who is practicing under the direct supervision of a licensed mental health provider is legally confidential, and the counselor cannot share or disclose the information without the client's consent. This means that what is said in our counseling session will be kept private with the exception of my discussions with my supervisor. But even then, *I will not use your name.*

However, as with all mandated reporters, I am ordered by law to report the things you have said if I have reason to believe that one or more of the following situations exist:

- I suspect child abuse, or abuse of an elder or disabled person.
- I feel there is a threat of you harming yourself or others.
- You become unable to take care of yourself and additional help is required.
- There is a mandated legal request for information (i.e., court subpoena).

As mentioned above, I will be supervised and at times I may consult with other professionals about your case. In those instances, *I will not use your name,* and I will continue to respect your privacy as much as possible.

Your clinical records will be maintained in accordance with the Health Insurance Portability and Accountability Act (HIPAA), a federal law that provides privacy protections and client rights with regard to the use and disclosure of your Protected Health Information (PHI) used for the purpose of treatment, payment, and health care operations. HIPAA requires that our agency provide you with a Notice of Privacy Practices for use and disclosure of PHI for treatment, payment, and health care operations. By the time you see me, you should have already read and signed the Notice of Privacy Practices form during your intake assessment. Your chart will be kept in a secure, locked file for a period of at least 7 years. These records will be disclosed only to individuals you authorize, with the legal exceptions mentioned above. To request a release of your clinical records, please contact me and I will provide you with the necessary forms to authorize the release of such information.

Complaints: If you have a concern or complaint about our working relationship or your relationship with the agency, let's talk about it. However, another option is to contact my supervisor (see above).

Emergencies

If you have a mental health emergency, you or your family members should contact your family physician or call one of the following community services for immediate assistance: 9-1-1, the Jackson County Mental Health Hotline 1-541-774-8201, Jackson County Helpline 1-541-779-4357, Siskiyou County Behavioral Health Crisis Service at 1-800-842-8979 (for after hours or weekends call 1-800-452-3669), or go to your nearest hospital emergency room.

This copy is yours to keep. Please take it home with you; you may want to read it again. We can talk more about all of these issues. If you have any questions regarding your counseling, please feel free to ask me at any time. **For my records, please sign and date below.**

DISCLOSURE STATEMENT ACKNOWLEDGMENT

I have read the Disclosure statement. I have reviewed my rights and responsibilities as a client of a registered intern under supervision. I have had an opportunity to ask questions.

Client signature: _____ **Date:** _____

(If Client is a minor, Client's Parent/Guardian must sign below)

Parent/Guardian signature: _____ Date: _____

Relationship to Client: _____

Registered Intern signature: _____ Date: _____