

Professional Disclosure Statement

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Thank you for reaching out to me to initiate therapy. I anticipate that this process will help you find hope, healing, and personal growth. Therapy is most effective when the relationship and expectations are clearly defined, when communication about the therapy process is open and ongoing, and when the client is committed and invested in the process. This Professional Disclosure Statement gives you an introduction to what you can expect from our work together. Please read this carefully and feel free to discuss any questions regarding material below at any time during therapy.

Formal Education and Training: I have a Masters degree in Marriage, Couple, and Family Therapy from George Fox University. I have experience providing counseling to individuals, couples, families, and groups from childhood through adulthood and have worked with a variety of mental health concerns including addictions, anxiety, attachment issues, depression, family conflict, identity and spirituality, parenting concerns, and trauma.

Philosophy and Approach: My counseling approach is based in systems thinking, attachment theory, person centered methods, and cognitive behavioral techniques. I also utilize techniques from child-centered play therapy, solution focused brief therapy, motivational techniques, and mindfulness practice as indicated by the needs and preferences of each individual. I deeply believe that each person and family has unique strengths that we can identify or develop to achieve their personal vision for wellness. I am dedicated to the importance of cultural sensitivity in the counseling process and am committed to learning about and operating within each person's worldview whenever possible. My practice emphasizes sharing of information, based on the belief that many people can make dramatic changes in their lives when empowered with education about symptoms, resources, and strategies for wellness.

Therapeutic Relationship: As a Licensee of the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its Code of Ethics. To maintain my license I am required to participate in ongoing continuing education classes that promote continued professional growth and skills in counseling. *In order to provide the highest level of care I participate in ongoing consultation/supervision with other therapists; if you have any questions regarding this I am happy to provide further information.*

As a professional counselor I will use my education, training, and therapeutic experience to help you progress toward your individually defined goals for healing and health. This includes following the Code of Ethics established by the Oregon Board of Licensed Professional Counselors and Therapists and the Code of Ethics provided by the American Counseling Association. These ethical guidelines place limits on the relationship between therapists and clients in order to protect your best interests. Some of these limitations are described below to help clarify and define the therapeutic relationship.

First, I am licensed as a professional mental health counselor, therefore I am not able to give other types of professional advice, such as medical, legal, or financial counsel. I only practice therapy within the scope of my training and experience and am happy to provide referrals to other professionals or specialists when needed. Second, state laws and ethical standards require

me to keep the contents of our therapy confidential, excluding certain exceptions discussed below. Confidentiality includes protection of the identity of therapy clients, therefore if we see each other in public spaces I will not approach or initiate interaction, which is an effort to protect your privacy. Third, according to ethical standards I can only be your therapist and cannot have other roles in your life. I cannot, now or ever, be a close friend, socialize with, or have a business relationship other than the therapy relationship with any client.

Risks and Benefits of Therapy: *As with any treatment, there are both benefits and risks associated with therapy. Possible risks include experiencing uncomfortable emotions, recalling unpleasant memories, or other increased symptoms. It may feel that problems are getting worse for a period of time as issues are brought up and discussed.*

While considering the risks, also consider that the benefits of therapy have been well documented in many research studies. Therapy can help resolve or reduce symptoms impacting daily life, can help people identify and achieve personal goals, can improve ability to develop and maintain healthy relationships with others, and can help people create habits of health and wellness in all areas of life.

Fees: Please request a copy of the fee schedule from East Cascade Counseling Services. (SHOULD I PUT INFO ABOUT MISSED SESSION FEES/CANCELLATION POLICY HERE OR NOT SINCE IT IS ON ONE OF THE OTHER FORMS?)

Client Rights: It is very important that you know your rights as a client seeking professional counseling. As a client of an Oregon licensee, you have the following rights under the Client Bill of Rights:

- To expect that a licensee has met the 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 (Oregon Administrative Rules 833-100);
- 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 or law, with the following exceptions:
 - 1) Reporting suspected child abuse; 2) Reporting imminent danger to you or others; 3) Reporting information required in court proceedings or by your insurance company, or other relevant agencies; 4) Providing information concerning licensee case consultation or supervision; and 5) Defending claims brought by you against me;
- To be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.

This Professional Disclosure Statement is given to all clients to provide information about the counseling relationship and procedures. Any unclear areas should be discussed the counselor. Any questions should be addressed until the client understands.

You may contact the Board of Licensed Professional Counselors and Therapists at 3218 Pringle Rd SE, #120, Salem, OR 97302-6312 Telephone: (503) 378-5499 Email: lpct.board@state.or.us

Website: www.oregon.gov/OBLPCT (Additional information about me as a counselor can be found at this website.)