Megan Knoster, MSW, LCSW

East Cascade Counseling Services LLC 731 NW Franklin Ave Suite 107 Bend, OR 97703 541-306-1128

Thank you for being here. I am grateful for the opportunity to work together, and to get to be a part of your journey to self discovery and healing.

Philosophy & Approach:

I utilize a person centered and strengths based approach, ensuring that you are the author of your own story, and that I will work alongside you in an effort to gain insight and support you in reaching your mental health and wellness goals. My goal as a clinician is to foster a safe and supportive space, so that you can feel empowered to work towards healing. My hope is to help illuminate the patterns and processes that may be standing in your way on this path. I will support and empower you to create your own positive changes as you embark on your healing journey.

In therapy, I utilize an integrative approach when working with individuals. As a trained and licensed clinical social worker, I bring a trauma-responsive lens to all that I do. Further, I also understand that we are impacted not only by each other, but by the systems and environments that we live within. Therefore, I am always offering the opportunity to consider what larger systems may be at play when obstacles and barriers show up on our journey to self discovery and wellness. I am additionally trained in Trauma Focused Cognitive Behavioral Therapy (TF-CBT), Dialectical Behavioral Therapy (DBT), Collaborative Problem Solving (CPS), Motivational Interviewing (MI), and have experience in Attachment Based Therapies and somatic practices for emotional release.

With over 10 years of experience, I have worked in various roles supporting the social, emotional and psychological wellness needs of youth: as a school and community based mental health therapist, school counselor, group work facilitator, youth mentor and coach, yoga and mindfulness meditation teacher, youth program director, consultant and grant writer. In consideration of my time spent in these clinical settings, you can trust my skill-set and experience. I fully believe in the power that lies within the connection between mind, body, and spirit and feel strongly about providing a safe space for young people to participate fully in their healing journey to overall wellness.

Education & Credentials:

I earned my Masters of Social Work Degree in 2013 from Boston University School of Social Work. While earning my degree, I specialized in clinical practice, and centered my training on understanding the impact and influence of trauma, addictions and group work. I currently hold my License for Clinical Social Work (LCSW) through the Board of Licensed Social Workers (BLSW) for the state of Oregon. Additionally, I hold my School Social Work license through the Teacher Standards and Practices Commission (TSPC) in the state of Oregon. Prior to moving to Oregon, I also held my Licensed Independent Clinical Social Work (LICSW), School Social Work license, and School Counseling license in the state of Massachusetts.

In addition to my clinical training, I have also received specialized training as a trauma-informed yoga instructor, which has allowed for me to incorporate a mind-body approach in the work that I do with individuals and groups.

Voluntary Participation:

Participation in therapy is understood to be an informed choice made by the client. In the state of Oregon individuals fourteen years or older have a right to consent to treatment. Some clients need only a few sessions to achieve their goals, while others may require more sessions over several months/years of counseling. Communication between

client and therapist is considered necessary and part of the clinical record, which is accessible to the client upon written request to view/obtain copies. Records are maintained for a period of seven years from date of termination.

Specialties & Interest Areas:

- Individuals
- Adolescents, Teens and Young Adults
- Depression
- Anxiety
- Trauma
- Student Athletes

Community:

Although our sessions may feel very personally intimate emotionally, it is important for you to realize that our relationship is professional. Our contact will be limited to paid sessions and phone contact you have with me. In nearly all instances, it would be unethical for any other relationship to exist between us, and I will not jeopardize your care by conducting another relationship with you besides that of client and therapist. As a Licensed Clinical Social Worker, I will abide by the Oregon Board of Licensed Social Workers' code of ethics. Practicing in a rural community, I communicate with my client(s) that I will maintain their confidence if I see them in a public setting.

Confidentiality:

Information revealed during treatment is confidential and cannot be disclosed without your written consent. However, there are a few exceptions where anonymity may be compromised. As a mandatory reporter, if a report of child or elder abuse is disclosed, it will be reported in abidance of State and Federal laws to create efforts of safety for the parties involved. Professional consultation is best practice for ongoing development within our profession; in consultation, the greatest level of anonymity will be maintained if supervision is sought in regards to your needs. Lastly, disclosures can be made on your behalf if there is a subpoena from court, or the licensing board if a formal complaint is filed. I may use and disclose Personal Health Information (PHI) so that I can receive payment for the treatment services provided to you. This will only be done with your authorization. Examples of payment related activities include determination of eligibility or coverage for insurance benefits, processing claims with your insurance company, or reviewing service provided to you to determine medical necessity. The type of information usually requested by insurance companies relates to diagnosis, symptoms, current functioning, treatment plan, response to treatment, and other information of this nature. I will, at your request, discuss this with you before I submit it. If you request that this information not be shared with your insurer, treatment may be arranged on a self-pay basis. At times, I will have to contact you regarding your treatment, scheduling of appointments, billing and other matters.

Required or permitted by law: Uses and disclosure of Protected Health Information (PHI) from mental health records not requiring consent:

Applicable law ethical standards permit me to disclose information about you without your authorization only in a limited number of situations. I disclose protected health information when I am required or permitted to do so by law. For example, if I believe that you present an imminent, serious risk of physical injury or death yourself, I may make disclosures I consider necessary to protect you from harm. If you communicate to me a specific threat of imminent harm against another individual, I may make disclosures I consider necessary to protect that individual from harm. Suspected child abuse or neglect must be reported to the authorities. Other disclosures permitted or required by law include the following: disclosures for public health activities, health oversight activities and disclosures to judicial and law enforcement officials in response to a court order or other lawful process.

Risks to Treatment:

Oftentimes, when we are working to create change and develop/enhance strategies to manage life stressors, things can sometimes seem to get worse before they are better. Therefore, there can be risks associated with treatment for mental health related issues and life stressors. As things are brought to the surface, there may be discomfort. This is a common part of the change and growth process, and aids in the awareness and healing through the therapeutic process.

Professional Fees and Cancellations: Fees for counseling services are established by East Cascade Counseling Services LLC and range from \$175-\$265. If you are paying out of pocket or have a copay, please pay at the start of the session. It is helpful to make out your check (to East Cascade Counseling Services LLC) before each session begins, so that our time will be used best. I have found that this arrangement helps us stay focused on our goals. Other payments or fee arrangements must be worked out in advance. Therapy is an investment in yourself in gaining skills, making changes and achieving goals. For you to get the best value for your money, we must work hard and be committed. If there is any problem with my charges, my billing, your insurance, or any other money-related point, please bring it to my attention. I will do the same with you. Such problems could interfere with our work and should be worked out openly and quickly. Please try not to miss sessions if you can possibly help it. A canceled appointment delays our work. If you must cancel, it would be helpful to provide as much advanced notice as possible. If sessions are canceled with less than 24 hours notice, it is our policy to charge for the lost time. Late cancellation (or no show) fee is \$75.00 for the first time and full fee for any subsequent. Please note, missed appointment fees are not eligible for insurance reimbursement. If you do not call, and you miss your appointment, the fee will apply. If you are going to be 15 minutes late or more to your session, please call to let me know. After 15 minutes without a call, I am not able to guarantee your session, and the no show fee will be applied.

Insurance Billing:

East Cascade Counseling Services LLC accepts some health insurance. It is up to you to check your benefits, including deductible requirements, before starting services. You are responsible for any costs not covered by insurance.

Emergencies:

In the event of an emergency, please call 911 or go to your local emergency department. Do not leave a message of mental health emergency on my voicemail. Although voicemail is checked during regular business hours, it is not a crisis line nor is it an emergency response operator.

Legal Proceedings & Court Hearings:

It is not my policy to testify at any judicial proceeding on behalf of my clients who are in an adversarial event. This includes issues related to marital, custodial and/or visitations of a family. My goal is to support families in session to have strategies to facilitate this process and make strides toward change and balance that help them achieve their goals.

As a licensee of the Oregon Board of Licensed Social Workers, I will abide by its Code of **Ethics:** To maintain my license, I am required to participate in continuing education, taking classes pertaining to subjects relevant to this profession.

As an individual receiving services from a Licensed Clinical Social Worker, you have the following rights:

 To expect the Licensed Clinical Social Worker has met the minimum qualifications of training and experience by state law

- To examine public records maintained by the Board and to have the Board confirm credentials of a Licensed Clinical Social Worker
- To obtain a copy of the Social Work 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:
 - a. 1 Reporting suspected child abuse;
 - b. 2 Reporting imminent danger to other individuals or self;
 - c. 3 Reporting information required in court proceedings by individual's insurance company, or other relevant agencies;
 - d. 4 Providing information concerning licensee case consultation or supervision;
 - e. 5 Defending claims brought by an individual against a licensee
- To be free from discrimination on the basis of race, religion, gender, or other unlawful category while receiving services
- Discontinue our work together at any time and for any reason, though this decision is most productive if we discuss it and plan it together.

You may contact the Oregon Board of Licensed Social Workers at 3218 Pringle Rd SE Ste. 240 Salem, OR 97302 Office: 503-378-5735, Fax: 888-252-1046, Email: oregon.blsw@blsw.oregon.gov.