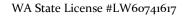


Lokahi Counseling and Consulting Services

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Disclosure Statement

This Disclosure Statement offers information about me and my counseling practice, and additional information required by law. Please read this statement and feel free to ask me questions prior to signing.

General Information

You have taken a very positive step by deciding to seek therapy. The therapeutic relationship is unique in that it is a highly personal and at the same time, a contractual agreement. Given this, it is important for us to reach a clear understanding about how our relationship will work, and what each of us can expect. This consent will provide a clear framework for our work together. Feel free to discuss any of this with me. Please read and indicate that you have reviewed this information and agree to it by filling in the checkbox at the end of this document.

My Background

I'm a licensed independent clinical social worker in practice since 2000. Most of my career I've provided psychotherapy to university students, faculty and staff within a college counseling center. This included work at Colorado State University, the University of California-Berkeley, Humboldt State University, Oregon State University and the University of Denver. These clinics are accredited by the American Psychological Association (APA) as training sites for therapists. Therefore, I also provided clinical supervision to graduate students earning their master's degree in social work, doctoral candidates in psychology and medical doctors completing their psychiatric residency. I opened my own practice in 2016 so I could offer more intensive and longer-term work for my clients. I am trained and experienced in doing individual and couples therapy with adults (18 years and over).

I hold these qualifications:

- I am licensed as a clinical social worker in Colorado (CSW.09923310) and as an independent clinical social worker in Washington State (LW 60741617). This is the top tier of licensure for my profession. It signifies expertise in the diagnosis and treatment of emotional and mental disorders based on advanced knowledge of human development, the causation and treatment of psychopathology, psychotherapeutic treatment practices, and social work practice as defined in advanced social work. Treatment modalities include but are not limited to diagnosis and treatment of individuals, couples, families, groups, or organizations.
- I have a master's degree in social work from Colorado State University, whose program is accredited by the Council on Social Work Education (CSWE).
- I completed three years of APA-approved internship. This included a pre-MSW internship and two years post-graduate training as a clinical fellow and resident.
- I completed a post-graduate clinical mentorship in psychodynamic psychotherapy through the American Psychoanalytic Association.

- I received 5 years of advanced clinical training at the Gestalt Therapy Training Center Northwest located in Portland, Oregon. I also continue advanced training though Gestalt Associated Training Los Angeles.
- I've received 110+ hours of training in couples therapy using the Crucible Approach ® and the Gottman Method.
- I'm a member of the National Association of Social Workers (NASW) and serve as a board member and Ethics Chair of the Washington State Society for Clinical Social Work (WSSCSW).

The Therapeutic Process

Psychotherapy is not like visiting a medical doctor. It requires your very active involvement. It requires your best efforts to understand and change thoughts, feelings, and behaviors. For example, I want you to tell me about important experiences, what they mean to you, and what strong feelings are involved. This is one of the ways you are an active partner in therapy.

My primary theoretical approach is **psychodynamic**. It has been demonstrated as effective for a range of difficulties and if you would like to read about this scientific support, the following article is available online at no-charge:

-- Shedler, J. (2010). The efficacy of psychodynamic psychotherapy. Am Psychol. 2010 Feb-Mar;65(2):98-109.

The primary goal of psychodynamic therapy is to increase understanding of why certain feelings, thoughts and behaviors recur. The essence of this treatment is exploration of those aspects of Self that are not fully known, especially as they are manifested and potentially influenced in the therapy relationship, or for couples in treatment, with your primary romantic partner.

In session you'll notice:

- A focus on feelings and expression of emotion.
- Exploration of attempts to avoid distressing thoughts and feelings.
- Identification of recurring themes/patterns of thoughts, feelings, self-concept, relationships, and life experiences.
- Discussion of past experience, especially with early caregivers and siblings.
- Focus on interpersonal relations.
- Focus on the therapy relationship to understand old and practice new interpersonal behaviors.
- Exploration of fantasy life including desires, fears, fantasies, dreams, and daydreams.

I may also use other therapies to assist you such as:

- **Behavioral Therapy** A focus on changing behaviors directly rather than seeking an understanding of internal motivations. A focus on rewards or cues that maintain certain behaviors is common.
- **Cognitive Therapy** Helping you to recognize and effectively refute automatic thoughts and beliefs that are unhelpful to you.
- Solution-Focused Therapy Noticing exceptions to the thoughts, feelings of behaviors that trouble
 you and exploration to discover how such relief is achieved so these solutions can be more broadly
 used.

- **Gestalt Therapy** A focus on your present experience in session and the use of "experiments" in which you may be asked to represent different aspects of yourself and speak from or to them.
- Sex Therapy I assist clients struggling with low sexual desire and/or difficulty with sexual functioning (e.g. anorgasmia, premature ejaculation, etc.). I use the "Crucible Approach" for this work which is an integration of sex and couples/marital therapy. Sex therapy often requires that I ask about your sexual fantasies, sexual behaviors and sexual history. The purpose of these questions is to understand how your relationship with yourself and your sexual partner results in the sexual symptoms you're seeking help for. Please note, this very personal work occurs with a safe therapeutic relationship. As a professional therapist I can never have a sexual or romantic relationship with any client during, or after, the course of therapy.
- Paradoxical Interventions I sometimes may encourage you to behave in a particular way, expecting you to behave in a different manner. This is referred to as a paradoxical intervention and will only be used for your benefit. Such intervention can be helpful as it energizes new self-awareness or behavior change in the service of your treatment goals. However, for such an intervention to work I can't explain the purpose in advance. If you ever have a question about such an intervention I'm happy to share that with you afterward.
- Medications Only a medical doctor, not a social worker or psychologist, can prescribe medication.
 While your doctor is skilled at prescribing medication for the mind a psychiatrist is specialized in such medications. If I believe a medication may be helpful for you I will refer you to your regular doctor or to a psychiatrist.

You have the right to refuse any of the above treatments and to choose a practitioner or treatment modality which best suits your needs. You can refuse at any time even if we've been working from a particular approach for many sessions.

The Benefits and Risks of Therapy

As with any powerful treatment, there are some risks as well as many benefits with therapy. For example, in therapy, there is a risk that clients will, for a time, have uncomfortable levels of sadness, guilt, anxiety, anger, frustration, loneliness, helplessness, or other negative feelings. Clients may recall unpleasant memories. These feelings or memories may bother a client at work or in school. In addition, some people in the community may mistakenly view anyone in therapy as weak, or perhaps as seriously disturbed or even dangerous. Also, clients in therapy may have problems with people important to them. Family secrets may be told. Therapy may disrupt a marital relationship and sometimes may even lead to a divorce. Sometimes, too, a client's problems may temporarily worsen after the beginning of treatment. Most of these risks are to be expected when people are making significant changes in their lives. Finally, even with our best efforts, there is a risk that therapy may not work out well for you.

While you consider these risks, you should know also that the benefits of therapy have been shown by scientists in hundreds of well-designed research studies. People who are depressed may find their mood lifting. Others may no longer feel afraid, angry, or anxious. In therapy, people have a chance to talk things out fully until their feelings are relieved or the problems are solved. Clients' relationships and coping skills may improve greatly. They may get more satisfaction out of social and family relationships. Their personal goals and values may become clearer. They may grow in many directions—as persons, in their close relationships, in their work or schooling, and in the ability to enjoy their lives. I do not take on clients I do not think I can help. Therefore, I will enter our relationship with optimism about our progress.

What to Expect from Our Relationship

I follow the standards of the National Association of Social Workers (NASW). In your best interests, the NASW puts limits on the relationship between a therapist and a client, and I will abide by these. Let me explain, so you will not think they are personal responses to you.

- I'm licensed and trained to practice clinical social work—not law, medicine, finance, or any other profession. I am not able to give you good advice from these other professional viewpoints.
- If we meet on the street or socially, I may not say hello or talk to you very much. This isn't a personal reaction to you, but a way to maintain the confidentiality of our relationship.
- I can only be your therapist and cannot have any other role in your life. I cannot, now or ever, be a close friend to or socialize with any of my clients. I cannot be a therapist to someone who is already a friend. I can never have a sexual or romantic relationship with any client during, or after, the course of therapy. I cannot have a business relationship with any of my clients, other than the therapy relationship.
- If you ever become involved in a divorce or custody dispute, I want you to understand and agree that I will not provide evaluations or expert testimony in court. You should hire a different mental health professional for any evaluations or testimony you require as: a) My statements will be seen as biased in your favor because we have a therapy relationship; and b) The testimony might affect our therapy relationship, and I must put this relationship first.
- I'm unable to accept your invitations via social media (e.g. facebook, linkedin, etc.) or to attend your family gatherings, such as parties or weddings.
- As your therapist, I won't celebrate holidays or give you gifts; I may not notice or recall your birthday; and may not receive any of your gifts eagerly.

Confidentiality

The session content and all relevant materials to the client's treatment will be held confidential unless you request in writing to have all or portions of such content released to a specifically named person/persons. Limitations of such client held privilege of confidentiality exist and are itemized below:

- If a client threatens or attempts to commit suicide or otherwise conducts him/her self in a manner in which there is a substantial risk of incurring serious bodily harm.
- If a client threatens grave bodily harm or death to another person.
- If the therapist has a reasonable suspicion that a client or other named victim is the perpetrator, observer of, or actual victim of physical, emotional or sexual abuse of children under the age of 18 years.
- Suspicions as stated above in the case of an elderly person who may be subjected to these abuses.
- Suspected neglect of the parties named in items #3 and #4.
- If a court of law issues a legitimate subpoena for information stated on the subpoena.
- If a client is in therapy or being treated by order of a court of law, or if information is obtained for the purpose of rendering an expert's report to an attorney.

Occasionally I may need to consult with other professionals in their areas of expertise in order to provide the best treatment for you. Information about you may be shared in this context without using your name.

If we see each other accidentally outside of the therapy office, I will not acknowledge you first. Your right to privacy and confidentiality is of the utmost importance to me, and I do not wish to jeopardize your

privacy. However, if you acknowledge me first, I will be more than happy to speak briefly with you, but feel it appropriate not to engage in any lengthy discussions in public or outside of the therapy office.

Office and Financial Policies

Counseling fees: Initial counseling intake session is \$170, which includes all the necessary forms and releases, family history, diagnosis and treatment plan. Full hour (60 minutes) counseling sessions are \$120. Couples Counseling and Family Sessions (90 minutes) are \$150. **Please note that if I am contracted with your insurance company, the amount you pay for sessions may be significantly less than these fees. **

<u>Emergencies</u>: I check my voicemail and email messages each working day. If you need to speak with me, please leave information about where I can reach you and I will call you back at my earliest opportunity. If your need is more urgent, please contact the Crisis Line at (360) 586-2800 or dial 911 for immediate help.

<u>Extended Leave</u>: If I am out of the office for an extended time (vacation, training, etc.) I will leave information on my voicemail about whom you may contact if you need to see someone before my return.

Appointments and Cancellations: Appointments for counseling sessions can be made by telephone, or through the Lokahi Counseling Online Portal. *Twenty-four hours notice is required if you need to cancel your appointment, so that I may offer that opening to another client.* With the exception of emergencies and unexpected illnesses, if you cancel an appointment within that 24-hour window, or you do not show up for an appointment, you will be asked to pay \$95. You may call, text or email me cancellation information so that your appointment can be rescheduled.

<u>Insurance Billing</u>: Although I will do my best to verify your insurance benefits prior to our first appointment, insurance companies can sometimes misquote and / or deny mental health counseling benefits. If this occurs, you will be responsible for paying me the balance of the billed amount. I accept cash and checks. Debit, credit and HSA cards can be used for an additional fee (3% of your billed rate).

<u>Electronic Communications</u>: Electronic communications can be relatively easily accessed by unauthorized people, which can compromise the privacy and confidentiality of such communication. Please know that emails and text messages are extremely vulnerable to such unauthorized access. <u>For Emails</u>: I use Google's G-Suite, which is a HIPAA Compliant email service with a signed Business Associate Agreement. **I do not offer email encryption unless you specifically request it.**

Washington State Law requires that the following language appear on every disclosure statement:

"Counselors practicing counseling for a fee must be registered or certified with the Department of Health for the protection of the public health and safety. Registration of an individual with the Department does not include recognition of any practice standards, nor necessarily implies the effectiveness of any treatment."

"The purpose of the Counselor Credentialing Act (Chapter 18.19 RCW) is (A) To provide protection for public health and safety; and (B) To empower the citizens of the State of Washington by providing a complaint process against those counselors who would commit acts of unprofessional conduct."

Agreement

Please sign below to indicate that you have read and understand and agree to all of the information in this disclosure, including:

- 1) All of the limits to confidentiality
- 2) That in cases of family counseling, you give me permission to share any one individual's secrets with other individuals in the family if necessary
- 3) Financial Policy (separate agreement)

I understand everything stated on this form, and agree to abide by it.

- 4) That if your insurance company misquotes or denies counseling benefits, you will be responsible for paying me the balance of my billed amount
- 5) That I have given you a copy of the State brochure entitled "Counseling or Hypnotherapy Clients," and a copy of the "Notice of Privacy Practices under HIPAA."
- 6) While I am licensed to diagnose and treat mental and emotional disorders, I do not claim to cure any physical condition.

Client	Date	Ross Artwohl, LICSW	Date
Client	Date	_	
 Client	Date	_	