



*Lokahi Counseling and Consulting Services*

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WA State License #MC60176402 / #CG60867679



**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**

Throughout my seventeen years of experience as a counselor, I've provided counseling and support to individuals, couples, families, elders, teens and young adults who have a history of trauma, chronic illness, disability, substance abuse, domestic violence and / or who are in the midst of crisis or major life transitions.

I am committed to serving those in marginalized communities, and I am LGBTQ and Trans Competent. For ten years, I performed counseling and crisis management at the Crisis Clinic, SafePlace, Community Resources, Olympia Underground Needle Exchange and EGYHOP, supporting the homeless community with harm reduction. And for the past seventeen years, I've worked as the Director for the Office of Sexual Assault Prevention at The Evergreen State College; as a Co-Founder and Therapist for Partners In Prevention Education helping runaway and homeless youth; As a Contract Therapist at Community Youth Services, and as an Early Learning Evaluator at South Sound Parent to Parent.

I hold these qualifications:

- I am a Licensed Mental Health Counselor Associate (MC60176402) and Registered Agency Affiliated Counselor (CG60867679). Being an Associate Clinician, I am fully supervised by Lynn Grotsky, MSW, LICSW, as I seek to attain full Licensure as a Mental Health Counselor in Washington State. I also receive case consultation from Tracy Kenela, M.A., LMHC, CRC, CEDS, ACHT, owner of Lokahi Counseling.
- Treatment modalities include but are not limited to diagnosis and treatment of individuals, couples, families and groups using Psychoeducation, Cognitive Behavioral Therapy, Mindfulness Techniques and Expressive therapies.
- I have a Master of Arts Degree in Counseling Psychology from Saint Martin's University, and a Bachelor of Arts Degree from The Evergreen State College.

## 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 to provide a warm and non-judgmental environment, utilizing a holistic, strengths-based approach to helping people heal. I am committed to providing effective, client-led services utilizing the following evidence-based tools:

- **Cognitive Therapy** - Helping you to recognize and effectively refute automatic thoughts and beliefs that are unhelpful to you.
- **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.
- **Energy Healing:** Reiki III and BioEnergy, with a special focus with children / teens, pregnancy and chronic illness.

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 American Counseling Association (ACA). In your best interests, the ACA 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 a Licensed Mental Health Counselor Associate, under the supervision of a fully Licensed Social Worker, and receiving consultation from a Licensed Mental Health Counselor. Both are Approved as Supervisors in Washington State. I am only Licensed and trained to practice counseling and psychotherapy under supervision. I am not able to practice in other specialty areas such as law, medicine, finance, or nutrition, and thus 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.
- 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. My current supervisor is Lynn Grotzky, MSW, LICSW, and I consult as needed with Tracy Kenela, M.A., LMHC, CRC, CEDS, ACHT, owner of Lokahi Counseling.

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, and yet I feel it is appropriate not to engage in any lengthy discussions in public or outside of the therapy office.

## Associate Counseling Fee Information and Financial Policies

Counseling fees: The standard rate of pay to see an Associate Clinician at Lokahi Counseling is \$75 per hour. Lokahi Counseling can also offer up to two (2) sliding fee scale slots for those who are in financial crisis, and require pre-approval by Tracy Kenela, owner of Lokahi Counseling. The per hour rate on the sliding fee scales is calculated at .001 x annual or family income. (For example, if you have an income of \$50,000 per year, you would pay \$50 for each hour of counseling). The minimum hourly rate on the sliding fee is \$40 per hour, and the maximum hourly rate is at the standard rate of \$75 per hour.

Insurance Billing: Although Lokahi Counseling is contracted through a variety of insurance plans (including Tricare, U.S. Family Health, Aetna, Regence, Blue Cross / Blue Shield, Premera and Kaiser) Associate Clinicians cannot bill Tricare or Kaiser because they require prior authorizations and full licensure in order to become contracted and submit billing.

Monthly Billing and Payment Methods: You will be billed by email each month for your counseling sessions via the Simple Practice Portal. Lokahi Counseling accepts payment in the form of cash and checks, as well as Debit, Credit and HSA cards which can be used for an additional fee (3% of your billed rate).

Emergencies: 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.

Extended Leave: 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 \$75. You may call, text or email me cancellation information so that your appointment can be rescheduled.

Electronic Communications: 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. **For Emails:** 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)**
- 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.

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

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Client

Date

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Chandra Lindeman

Date