

PROFESSIONAL DISCLOSURE STATEMENT

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Counseling Approach & Philosophy

My role as a counselor is to provide an environment of safety, trust, and mutual respect from which the clients and I cooperatively explore their world. We work together to find new perspectives and options from which the clients may choose in order to change their life situation according to the goals they establish.

I seek to understand their lives and world from their point of view, and to assist and to encourage them to make wise choices. I consider clients as being members of many interrelated systems (including family, work, and culture). People grow toward health and wholeness by balancing the fulfillment of their needs and obligations with their inherent risks and rewards. I use primarily a cognitive-behavioral approach, which looks at how thinking affects behaviors and emotions. Improving communications is often a component of my work. Change may occur through greater understanding and/or altering behavior patterns. I also incorporate Integrative Marital Therapy, which focuses on how past relationships and experience affect present perceptions. I believe that marriage is a unique relationship and the foundation upon which the family and greater society are built.

As a licensed professional, I adhere to the Code of Ethics of the Oregon Board of Licensed Professional Counselors and Therapists. As a Christian, I have a spiritual orientation which shapes my approach to counseling, and I am a member of the American Association of Christian Counselors (AACC) and Christian Association for Psychological Studies (CAPS).

Continuing Education & Supervision

I am a graduate of the George Fox University Counseling Department (2001) and hold a Master of Arts Degree in Marriage and Family Therapy (MA MFT). I have completed coursework in personality theory, psychopathology, human development, family systems, biblical studies, group process, marriage and family therapy, and related subjects. My undergraduate work in Family Studies was completed at Corban (formerly Western Baptist) College. I continue my board requirements for ongoing education through workshops and seminars approved for such credit, as well as personal reading and research through professional associations.

I may satisfy some of these continued education requirements through professional supervision. Every precaution will be taken to protect the identity and privacy of the client during any supervision and/or consultation. *Because of the sensitive nature of the counseling privilege, I will avoid social or business relationships or any reference to my professional connection with clients outside of the office.*

Appointments Missed or Cancelled

There is no charge for appointments cancelled or rescheduled more than 24 hours in advance. However, except for emergencies, **your regular fee will be charged for failure to cancel in advance.** This payment will be due before another appointment will be attended. If you are more than 15 minutes late to a scheduled appointment, I may consider the appointment as missed and bill accordingly. If two scheduled appointments are consecutively missed without your contacting me I will assume you have opted to discontinue therapy. A referral with a termination notice will be offered via mail along with the closing bill.

Sessions are generally scheduled weekly, but other arrangements with me may be made. Appointments are customarily made at the end of each session for the next session. They may or may not be on the same days or at the same times. Individual and couples' sessions are approximately 50 minutes in length.

Confidentiality

All counseling/therapy is confidential within the exceptions provided by law. These exceptions are specified in the Bill of Rights section herein. I am otherwise unwilling and unavailable to offer support or testimony in court or legal situations of any kind. I may consult with other professionals or supervisors on client issues, but identifying details are kept strictly confidential, unless you sign a specific written release. Generally, I consider harboring secrets between couples or family members to be counterproductive to therapy.

Any electronic recording (audio and/or video) of therapeutic sessions will only be done with your express written permission. You may rightfully refuse such recording. A separate "Permission to Electronically Record" form is used to secure your required consent.

While wireless telephone communication is reasonably private, **it is not guaranteed to be absolutely secure.** Because my business phone is cellular, you should be aware of this to consider keeping your privacy as well-protected as possible. Any correspondence via e-mail is likewise not guaranteed to be absolutely private, so reasonable precautions are advised.

Benefits & Risks of Therapy

While the effects of counseling therapy have generally proven to be beneficial, there are some risks to consider. For example, some clients will experience uncomfortable feelings, and may, for a time, actually feel worse as they begin to work on sensitive areas of their lives or recall unpleasant memories. These feelings could possibly affect the client's life outside the counseling office. Others in the client's life may have a negative view of counseling which might create distance in their relationship. Any doubts or concerns the client has should be discussed prior to therapy and, if possible, should be alleviated in order to minimize the potential risks and maximize the benefits of therapy. Additionally, there may be options to counseling, such as support groups and/or self-help books, which may help to provide the results the client is seeking. Feel free to discuss any of these with me.

Fee Schedule & Policy

Payment is expected from you at the time of service, unless prior arrangements with me have been made. Any other costs for processing or materials used in therapy are at the client's option. A package price for pre-marital counseling is \$245.00 for five 1 1/2 hour sessions, and includes materials. I do not bill insurance companies. Returned checks are subject to an additional \$25.00 charge over the face amount. Telephone consultation or counsel and any documentation fees are charged at the hourly individual session rate or portion thereof, calculated to the nearest 1/4 hour.

The following sliding scale is offered for a standard 50-minute session, and is based on the clients' "adjusted gross income" listed on their most recent federal tax form. The clients' fee level is subject to revision and adjustment should their financial status significantly change during the course of therapy.

	\$0 - \$25,000.....	\$45.00	I signify by my initials below that I have discussed with my therapist my needs and have agreed to the level of income/fee I have circled. Initials: _____ Initials: _____
<i>Please</i>	\$25,001 - \$30,000.....	\$50.00	
<i>circle one fee →</i>	\$30,001 - \$35,000.....	\$55.00	
<i>according to your</i>	\$35,001 - \$40,000.....	\$60.00	
<i>annual income level</i>	\$40,001 - \$45,000.....	\$65.00	
	\$45,001 - \$50,000.....	\$70.00	
	\$50,001 & above.....	\$80.00	

Your Bill of Rights

As a client of services provided by an Oregon licensee or registered intern, you have the following rights:

1. To expect that a licensee has met the minimal qualifications of training and experience required by state law;
2. To examine public records maintained by the Board and to have the Board confirm credentials of a licensee;
3. To obtain a copy of the Code of Ethics;
4. To report complaints to the Board;
5. To be informed of the cost of professional services before receiving the services;
6. To be assured of privacy and confidentiality while receiving services as defined by rule and law, including the following exceptions:
 - Reporting suspected child abuse,
 - Reporting imminent danger to client or others,
 - Reporting information required in court proceedings or by client's insurance company, or by other relevant agencies,
 - Providing information concerning licensee case consultation or supervision, and
 - Defending claims brought by the client against licensee;
7. To be free from being the object of discrimination on the basis of race, religion, gender, or other unlawful category while receiving services.

The Board may be contacted at the following address and phone number:

Oregon Board of Professional Counselors and Therapists
 3218 Pringle Road SE #250
 Salem, Oregon 97302-6312
 (503) 378-5499

By signing below, you affirm that you: (1) have read and understood the above policies and procedures, (2) are aware of the risks and benefits to counseling or therapy and options to them, and (3) agree to counseling/therapy within the above described conditions.

Client's Signature

Client's Signature

Date

Counselor's Signature

Date