



ADHD Advantage
5234 NE Farmcrest St.
Hillsboro, OR 97124
503-459-2073

Informed Consent

What is counseling?

Counseling is a way to resolve the problems in our lives. Counseling provides a way to look at things from a new perspective and to see the strengths that you have as a person, as a student, as a member of a family, and as a member of society. Counseling is not about someone telling you what to do or giving you advice, but about providing you with the tools that you can use to create your own solutions.

How does it work?

In our first session together, we will explore your concerns, and I will ask you about your life, your family, and your history. Together we will begin to create a plan based on your concerns. In later sessions, we will begin to explore solutions to the concerns that you have through talking and through assignments between sessions. Assignments might be something like noticing how often something happens each day or trying an experiment like smiling more often.

What can I expect from the counselor?

You can expect that I will listen to your concerns with kindness and caring, and that I will check with you to make sure that I truly understand what you are telling me. You can expect that I will be honest and respectful of you at all times. You can expect me to answer your questions truthfully and clearly in language that you understand. You can expect me to provide you with the best tools to help you resolve your concerns. You can expect that if I am uncertain about how to continue that I will consult with a more experienced Supervisor to support me in providing you with the best care possible. As a Registered Intern of the Oregon Board of Licensed Professional Counselors and Therapists, I will abide by its Code of Ethics. I am under the ongoing supervision of Steven Berman LCSW.

What does the counselor expect from me?

I expect that you will come to your appointments on time, that you will ask me any questions that you have about counseling or assignments, and that you will at least consider trying out any experiments or assignments that we discuss. I expect that you will pay your fee at the time of the session.

Karen's Bio

Karen DeBolt received her Masters in Counseling Psychology with an emphasis in Child and Family Therapy from Lewis and Clark College. Karen uses a strength-based approach in order to highlight the talents, abilities and resources of each client. Karen obtained her bachelor's degree in Psychology

from UC Irvine in 1985, then began working in the business world for a number of years before returning for her Master's degree. Karen lives in Hillsboro, Oregon with her husband, Dan, her three children, and a Samoyed named "E."

What are my rights?

As a client of an Oregon Registered Intern, you have the following rights:

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

You may contact the Board of Licensed Professional Counselors and Therapists at 3218 Pringle Rd. SE, #250, Salem, OR. 97302-6312 503-378-5499.

I look forward to working with you!

Client Signature

Karen DeBolt, MA
Child and Family Therapist

I, _____ have read this information, asked any questions that I had, and understand my own and/or my child's rights.

Parent/Guardian Signature

Date



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Financial Agreement

Fees

Coaching/Counseling is charged at \$80 per 50-minute session for individuals, couples and families.

Advantage Camps will be billed at \$80 per week and will include 2 hours of child group treatment, and one hour of coaching in person, and telephone consultation with teachers/primary care providers, as necessary. Advantage Summer Day Camp and holiday camps will be billed at \$900 per week and will include 6 hours of child group treatment, and one hour of in person coaching, and telephone consultation with teacher/primary care providers as necessary.

Payment & Billing

Payments are expected at the time services are rendered. Payment for camps will be required to hold a place. If the child is unable to attend due to illness, you may choose another week or your money will be refunded. We do not accept any insurance plans at this time. We will provide an invoice for services upon request. There will be a \$40 fee for returned checks.

I acknowledge that I have read and understand the above fee agreement and that I am responsible for all charges incurred for the treatment of myself and/or my family.

Responsible Party Signature

Date

Responsible Party Name (please print)

Client Name (please print)