

Clear Heart Counseling
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Professional Disclosure & Informed Consent Form

Stuart Malkin

Licensed Professional Counselor Registered Intern

Approach to Therapy

I see each of us as knowing the truth of what makes us whole and fulfilling our life purpose. Sometimes we forget what fulfills and inspires us or we form habits that move us away from being nourished in our personal and professional lives. Using mindfulness to study the present, I support clients in compassionately visiting and honoring the places they get stuck. By doing this exploration, we start developing a relationship with the parts we push away, which also have unseen and untapped strength and resilience. I collaborate with clients in identifying and practicing being with their strengths, resiliencies, and wholeness so that they can show up in life with authenticity, compassion, and purpose.

Formal Education and Training

I completed a Masters Degree in Counseling at Portland State University in June 2017. The focus of my studies was Clinical Mental Health and included course work in counseling theories, families and couples counseling, career and lifestyle planning, and multi-cultural counseling. I also completed a year-long internship with M.E.T.A Counseling Clinic in 2016-2017, completed a two-year Comprehensive Training program studying mindfulness therapy approaches including Hakomi, Recreation of Self (RC-S), attachment, and trauma work through a two-year M.E.T.A in 2014-2016. I have also assisted in teaching the M.E.T.A Comprehensive year one in 2015-2016.

The counseling profession is a shift from a twenty-year career in science and technology. I completed a Bachelors and Masters degree in Meteorology and worked in High Tech companies developing software applications that utilized weather data for utilities, residential irrigation, and architectural design. I believe my science background partly informs my approach and helps integrate working with clients mindfully, somatically, and cognitively.

Fees

My fee for an individual 60-minute session is \$80, \$90 for 60-minute couple counseling session, and \$100 for a 75-minute couple counseling session. I offer a limited number of discounted fees for clients who are experiencing significant financial hardship. I accept cash, checks, and credit cards. Checks should be made out to "Clear Heart Counseling". For cash, please bring exact amount as I am unable to make change. I currently do not take insurance.

Supervision

I am currently supervised by Stephen Keeley, LPC (503-332-8997)

Code of Ethics

As a Counseling Intern, I will abide by Oregon Licensing Board's Code of Ethics set forth in OAR Chapter 833, Division 60 and the Hakomi Institute Code of Professional Conduct and Ethics.

Client Bill of Rights

As a client of an Oregon registered intern, you have the following rights:

- To expect that a licensee has met the qualifications of training and experience required by state law;
- To examine public records maintained by the Board and to have the Board confirm credentials of a licensee;
- To obtain a copy of the Code of Ethics (Oregon Administrative Rules 833-100);
- 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 or law, with the following exceptions: 1) Reporting suspected child abuse; 2) Reporting imminent danger to you or others; 3) Reporting information required in court proceedings or by your insurance company, or other relevant agencies; 4) Providing information concerning licensee case consultation or supervision; and 5) Defending claims brought by you against me;

- To be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.

You may contact the Board of Licensed Professional Counselors and Therapists at
3218 Pringle Rd SE, #120, Salem, OR 97302-6312 Telephone: (503) 378-5499
Email: lpct.board@state.or.us Website: www.oregon.gov/OBLPCT

For additional information about this intern, consult the Board's website

Confidentiality

Our work together is confidential. What you choose to discuss with me is private and protected by federal and state laws. Except under unusual circumstances, discussed below, I will not share anything we talk about with others unless I have your written permission to do so. Similarly, if it is helpful to exchange information with others, such as your physician, school or work personnel, or family members, I will explain the rationale and discuss which information I believe should be shared. If you agree that I can share this information, then I will ask you to sign a release of information form.

You may direct me to share information with whomever you chose, and you can change your mind and revoke that permission at any time. I will always act to protect your privacy, even if you give me permission in writing to share information about you.

Any written documents related to you or your counseling will be stored in a locked file cabinet, not electronically. Only I will access your file.

To provide the best possible support, it's important for me to learn about your motivations for seeking therapy, your past experiences with therapy, your past and current relationships, and your future aspirations. Your honest answers will help create a partnership between us, oriented towards the specifics of your circumstances and what you would like to address. This process is central to the quality of our working towards your goals. I will welcome your continued feedback, questions or concerns throughout this process.

Exceptions to Privacy

It is important for you to know that some things, by law, cannot be kept private. They include the following:

- If I firmly believe that you intend to harm yourself, I am required by law to inform other people who can help you to protect yourself.
- If I am court ordered to testify in court, I may have to give information about you without your permission. If I am subpoenaed or receive a court order, I will make every effort to contact you. If you oppose release of information, a court may nevertheless order me to disclose information about you.
- A non-custodial parent who wants to learn about their child's counseling may have the right to review their child's treatment record and to discuss their child's care with me.
- If you were to bring suit against me or the clinic, I may need to break confidentiality in a legal defense.
- As a mandated reporter, if I learn that you have harmed a child or vulnerable adult, I am required by law to report this to authorities. I may inform family members, other health care providers or the police.
- Oregon law does not require me to report your intention to hurt another person, but Oregon law allows me to tell the appropriate authorities if I believe this person is in clear and immediate danger.
- These exceptions seldom occur, but it is nonetheless important for you to be aware of them. I encourage you to talk to me about any concerns related to privacy at any time in our work.

Cancellation Policy

If you need to cancel or reschedule an appointment, please provide at least 24 hours notice. You may be charged the full appointment fee if you cancel less than 24 hours in advance.

What to Expect

As a Mindfulness Counselor, I will invite you to work with a special kind of consciousness called "mindfulness." This is a way of paying attention to yourself with curiosity, openness, and acceptance. It often means closing your eyes to focus your attention on your actual experiences in the moment. I may also offer suggestions for experiments to help you study what is and is not working in your life, create related emotionally corrective experiences, or explore ways to intentionally shift from disempowered, painful, limiting states of being into empowered, alive, preferred states of being.

As part of my mindfulness training, I sometimes use touch in counseling. If touch is used in a session, its purpose is to support self-study and not to provide relief of physical tension or distress. Touch used experimentally is always non-sexual, done in mindfulness with your permission, and in service of the therapeutic process. Of course, you remain in charge and are always free to decline anything that feels uncomfortable for you for any reason.

Risk in Counseling

Counseling is not without risk. Some people experience an increase in feelings of stress, especially during the early stages of counseling. Some problems may seem to get worse before they get better. Exploring longstanding, deeply seated issues can sometimes initially seem to aggravate rather than help the issue, especially in couples and family counseling. Some people find themselves feeling emotions and having insights that are new and uncomfortable, sometimes leading to feelings of discouragement and thoughts of quitting counseling. Some people are surprised by how others in their lives respond as counseling progresses. These dynamics are natural and to be expected. You may also experience other unique consequences of counseling. I encourage you to talk with me about them as and if they occur.

Ending Counseling

I will do my best to provide effective therapy that meets your needs. However, if we determine that I cannot adequately help you, I will assist you in finding an alternative counselor. If at any time you have doubts about our work together, please talk to me about your concerns. You may terminate counseling at any time. Typically, termination occurs when your goals have been met, a conflict of interest arises, policies have been broken, or it becomes evident that you should be referred to another practitioner. I encourage you to talk to me about your inclination to discontinue before acting, however, so that we may explore the issues, implications of terminating, and bring closure to our work together.

Emergencies, Immediate Response Needs

Since I do not provide crisis services, in the event of a mental health emergency please call the Multnomah County Crisis Line at 503-988-4888, or call 911, or go to the emergency room of the hospital nearest you. If you feel that you might hurt yourself, go to the nearest hospital emergency room. In the event of a difficulty related to our counseling work that you need immediate support with, you may call me at voice mail **(971) 266-1693** and leave a confidential message. Please identify that you need a call back from me and leave a call back number. I will return your call within 24 hours during Monday through Friday. If you call on the weekend, I will try to get back to you as soon as I can, but may not be able to until Monday.

Inclement Weather

I follow the Portland Public School inclement weather policies. If the weather or travel restrictions in your area make it dangerous or impossible to attend your counseling session, you will not be charged if you do not attend. Please call or email to let me know you cannot make it.

Contacting Me

You can reach me at **(971) 266-1693**. I will respond to you in as timely a manner as I can, and certainly within 24 hours. If you do not hear from me within 24 hours, please contact me again. Please do not send text messages.

For scheduling purposes only, you may email me at stuart@clearheartpx.com. Please do not share sensitive information via email with me, as I cannot guarantee confidentiality with email communication.

Though we may occasionally communicate by phone in support of your therapeutic process, the most effective way for us to work together is in person during your scheduled sessions.

Consent to Treatment

I have read and initialed and I understand the above information. I consent to participate in treatment and/or evaluation. I understand that I may refuse services at any time. In the development of my treatment plan, I will be informed of the risks and benefits, the availability of alternatives, and the consequences of withdrawing before treatment is complete.

Client Name (Printed) _____

Client Signature _____ Date _____

Client Name (Printed) _____

Client Signature _____ Date _____

Stuart Malkin _____ Date _____
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