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The following is information that you, as a client, need to be aware of as you take on this therapeutic endeavor.

I am a registered counselor, Washington license # MG 60173239. I have completed a Masters Program at Chapman University in Marriage Family Therapy. I am qualified to work with individuals, couples, and families who are experiencing emotional discomfort in their lives. In the past I have worked with Ft. Lewis Army soldiers who have experienced Post Traumatic Stress Disorder (PTSD), individuals with depression and anxiety issues, and those (both genders) who have experienced sexual traumas as children and adults. I am continually participating in professional education courses in the counseling field. I belong to both the Pierce County Counselors Association (PCCA) and Southern Washington Association of Behavioral Health (SWABH).

I do not have a medical background and cannot prescribe drugs. However, if you feel that prescription medications may help to alleviate depressive symptoms consult your personal physician. Medications can be helpful but should not be taken in isolation. They work best when partnered with the therapeutic process for a better recovery. Treatment modalities will vary from client to client. Depending on the issue that the client is addressing therapy may use a combination of the following: Eye Movement Desensitization and Reprocessing (EMDR), Cognitive Behavior Therapy (CBT), Solution Focused Therapy, Family of Origin, Jungian, psycho-education, and/or relaxation techniques. These treatments may be use separately or collectively. In addition, as part of the therapeutic relationship, I may encourage you to consult with your personal physician.

I am here to assist you in reaching the goals you have set for yourself. I am not here to change your lifestyle or values but to help you better understand how your thought patterns and behaviors are impacting your life.

My belief is to work on the issue that you bring to the counseling session. Depending on the issue you are addressing, it may take a few sessions to several months to achieve your goal. You are the one to decide how hard to work or for how long. You may reach your goal only to find that there are other issues that you may wish to address. We can continue to work as long as both the counselor and the client feel progress is being made. As the client, you are in complete control and may end our counseling sessions or you may choose to take a break.

You are free to discontinue therapy at any time. However, if something is not working for you please discuss it with me and we may be able to try something else that may be more effective. If you choose to leave I will help you find another counselor that may be a better match for you.

The therapeutic process does not take place solely during sessions, but is ongoing. There may be times that I will assign "homework" that I feel will further your therapy.

The therapeutic relationship is one built on trust. Because I am a person, there may be times that I say something that may trigger negative thoughts or feelings in you. If this happens you need to let me know. This may be an opportunity for you to explore a deeper issue and used as a spring board for further personal growth and awareness.

Sometimes your symptoms will get worse before you notice a positive change in your life. This is a common occurrence for many clients and part of the therapeutic process.

Washington State Department of Health (DOH) requires the following statement: "Counselors practicing counseling for a fee must be credentialed with the department of health for the protection of the public health and safety. Credentialing of an individual with the department does not include a recognition of any practice standards, nor necessarily imply the effectiveness of any treatment." You may obtain more information by going to DOH web site at www.doh.wa.gov or calling (800) 525-0127.

Sessions are scheduled for a full 60 minutes. This time also includes time to reschedule the next appointment. If you arrive late, your session will not be extended and you will be charged at the full rate. Sessions will end promptly at the end of the hour. So plan your time accordingly. Appointments must be cancelled 24 hours in advance in order to avoid full charge for the session.

Sliding scale for sessions will be _____. This will change if your financial situation changes. We will work on the honor system. Phone calls that exceed six minutes will be billed accordingly. Payment is due in full at the end of each session. I take cash or personal checks.

Sessions will be confidential with the exception of suicide, homicide, child abuse, the intent to destroy property, abandonment, abuse, or financial exploitation or neglect of a vulnerable adult. I am mandated by Washington State law to report these acts of intention to the proper agencies.

In addition, to provide you with the best quality of care, I may discuss your case with a licensed supervisor without identifying your name.

Due to the therapeutic nature of our relationship it is important that we maintain a professional relationship. Contact with me will be limited to paid professional sessions, so please do not invite me to social situations/gatherings or offer me gifts of any kind. Your therapeutic needs will be best met by adhering to a professional relationship and focusing on your needs, exclusively. There will be times in our sessions that you will learn more about me. This sharing of information is used to help further your progress in therapy.

Please sign below indicating that you have read and understand the above information. If you feel uncomfortable or find any part of this Disclosure Statement confusing, please discuss it with me. You will receive a copy for yourself and the original will be kept in your file.

Date

Print Name

Monica Olivas, MA MFT
Washington State License # MG60173239

Client's Signature