

LCMHC Professional Disclosure Statement

Alison York Sanderson, Licensed Clinical Mental Health Counselor

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Qualifications

I hold a Master of Arts degree in Professional Counseling granted in December 2011 by South University in Columbia, South Carolina. In addition to my education I hold a Licensed Clinical Mental Health Counselor license (#13298) and a Licensed Professional Counselor license (#6194) issued by the state of South Carolina. I have been practicing (post-masters) in the counseling field for nine years.

I am a certified practitioner in Eye Movement Desensitization and Reprocessing (EMDR) from the EMDR Institute. I have also complete advanced training in Emotionally Focused Therapy for Couples and hold a certificate in expressive arts therapy (please note that certificate numbers are not issued for these trainings/certificates). I am also a Nationally Certified Counselor (NCC) and Certified Clinical Mental Health Counselor certified by the NBCC.

Counseling Background

In my private practice I serve adults and teen individuals challenged with symptoms associated with depression, anxiety and trauma related experiences. I also serve couples and provide premarital, marital and relationship counseling.

I am passionate about helping others discover their potential and life purpose. In my practice I prefer to use a Humanistic and Solution Focused approach to counseling. However, I pull from a variety of theories and models to fit your needs. I often employ the use of EMDR, expressive arts therapy and cognitive behavioral approaches. When working with couples, my primary approach is Emotionally Focused Therapy which has a three-fold theoretical orientation; it combines Experiential, Attachment and Systemic theories.

I believe that all the answers are within you, and, together, we will create a plan to discover what you need to live a meaningful, healthy and purpose filled life. I will be happy to explain all of these counseling styles to you. I comply with the American Counseling Association Code of Ethics for Professional Counselors and will provide you with a copy of the Code of Ethics for Professional Counselors upon request.

Session Fees and Length of Service

All sessions are 55 minutes. My fee for service is \$175 per 55 minute "therapy hour" for individuals and \$200 per therapy hour for couples. I accept cash, check, credit or debit card. I am not in network with insurance panels. However, I can bill your insurance provider for potential out of network reimbursement. Please ask me if you have any questions about this process.

Use of Diagnosis

If you want to be reimbursed by your insurance company, you should be aware that most insurance contracts require you to authorize me to provide a clinical diagnosis, a treatment plan or summary, or in rare cases, a copy of your entire record. This information will become part of the insurance company's

files. While insurance companies claim to maintain confidentiality, I have no control over what they do with the information once they receive it. If a qualifying diagnosis is appropriate in your case, I will inform you of the diagnosis.

Confidentiality

In general, the privacy of all communications between a patient and a counselor is protected by law, and I can release information about your work to others only with your written permission. But, there are a few exceptions:

- If I am ordered by the court to disclose information. In some proceedings involving child custody those in which your emotional condition is an important element, a judge may require testimony, if he/she determines that the issues demand it.
- If a patient threatens to harm herself/himself, I may be obligated to seek hospitalization for him/her or to contact family members or others who may help provide protection.
- There are some situations in which I am legally obligated to take actions to protect others from harm, even if I have to reveal some information about a patient's treatment. For example, if I believe that a child or vulnerable adult (i.e. an elderly or disabled person) is being abused, I must file a report with the appropriate state agency.
- If I believe that a patient is threatening serious bodily harm to another, I am required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the patient.

Complaints

Although clients are encouraged to discuss any concerns with me, you may file a complaint against me with the organization below should you feel I am in violation of any of these codes of ethics. I abide by the ACA Code of Ethics (<http://www.counseling.org/Resources/aca-code-of-ethics.pdf>)

North Carolina Board of Licensed Clinical Mental Health Counselors

P.O. Box 77819

Greensboro, NC 27417

Phone: 844-622-3572 or 336-217-6007

Fax: 336-217-9450

Email: Complaints@ncblpc.org

Acceptance of Terms

We agree to these terms and will abide by these guidelines

Client: _____ **Date:** _____

Counselor: _____ **Date:** _____