

LPC Professional Disclosure Statement

Donna Rogers, LPC

Peace of Mind, Inc.

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Qualifications:

- Master of Arts in Mental Health Counseling from Argosy University 2012.
- North Carolina Licensed Professional Counselor license number 9684
- National Certified Counselor certification number 298785
- International Association of Trauma Professionals (IATP) Certified Clinical Trauma Professional (CCTP)
- Certified Clinical Military Counselor (CCMC)

About Your Therapist:

Donna Rogers is originally from Youngstown, Ohio and earned her dual Bachelors of Arts degrees from Mount Union College in both French and Psychology in December of 2000. She was a teacher in middle and high schools for 10 years, in both Ohio and North Carolina, before returning to graduate school to pursue a master's degree. Donna completed her graduate practicum and internships at Peace of Mind, Inc., under supervision of Molly VanDuser. During this period she received specialty training in Autism, trauma, grief, and ADHD. Donna received a master's of arts degree in mental health counseling from Argosy University, Sarasota Campus, in April 2012 and was awarded her Licensed Professional Counseling Associate License in September 2012, and her Licensed Professional Counselor License in January 2015. Donna has completed a one-week hands on training through the TEACCH Autism Program – Services Across the Lifespan through UNC School of Medicine for adolescence and young adulthood. Donna completed the Advanced Topics Seminar through the TEACCH Autism Program – Services Across the Lifespan through UNC School of Medicine. Donna has completed Certified Clinical Trauma Professional training and has received certification through the International Association of Trauma Professionals. Donna has also completed the Certified Clinical Military

Counselor training through the Licensed Professional Counselor Association of North Carolina and is now CCMC certified. Donna has completed EMDR training. Donna has completed Human Givens Part I training and is working on completing requirements to start Human Givens Part II in the fall.

Counseling Background

Donnas' experience working with middle and high school aged adolescents spanned over a ten-year period of teaching French, Psychology, Sociology, and Theatre Arts, as well as completing her graduate practicum and internship at Peace of Mind, Inc. Donna has worked as an LPC-A at Peace of Mind, Inc. since October 2012. Experience at the private practice included working with children, adolescents, adults, couples and families. Donna has experience working with multicultural issues as well, given the diversity of students and subjects that she has taught as well as the diversity of the clients she worked with during her Practicum and Internship, and time as an LPC-A. Specialty areas include: Trauma Focused Cognitive Behavioral Therapy (TF-CBT), Person Centered Therapy, Autism Spectrum Disorders, ADHD, Depression, Anxiety, Adjustment Disorder, Anger Management, Parenting Skills, and Play Therapy.

Session Fees and Length of Service

Your counselor is a self-employed, Licensed Professional Outpatient Treatment Counselor at Peace of Mind, in Lillington, North Carolina.

Current insurance panels include: Medicaid, Blue Cross Blue Shield, IPRS, Medcost, United Health Care, ComPsych, Magellan, Coventry, TriCare Standard, TriCare Prime, Aetna and Self Pay.

Fees charged for self pay client sessions are as follows and there is sliding fee scale for those with IPRS should funding run out:

- Initial Assessment: \$120
- Individual Session \$90
- Family Session \$110

Cash, checks, or credit cards are acceptable methods of payment.

Your session will start on time and will typically last 50 minutes. Your counselor's framework and theory used is family systems and your counselor will utilize cognitive behavioral strategies and interventions, all of which will be explained to you in an understandable manner at the first session. Should the services provided be for Autism Spectrum Disorder, your counselor will use Structured TEACCHing interventions which will be explained to you as well at the first session.

You can expect to learn specific skills intended to enhance relationships, and you will have the opportunity to practice new skills within the safety of the counseling sessions. While the process of learning and change is sometimes uncomfortable, you can expect no harm to come within the counseling relationship. Should you find, in practicing your new skills at home, school, or work that the result has an unintended negative effect in your life; you can also expect to bring that information to your next appointment, where modifications can be considered. Always, your sense of safety is the primary concern and focus.

Use of Diagnosis

Some health insurance companies will reimburse clients for counseling services and some will not. In addition, most will require a diagnosis of a mental health condition and indicate that you must have a mental health diagnosis before they will agree to reimburse. Some conditions for which people seek counseling do not qualify for reimbursement. If a qualifying diagnosis is appropriate in your case, I will inform you of the diagnosis before we submit the diagnosis to the health insurance company. Any diagnosis made will become part of your permanent clinical and insurance records.

Confidentiality

All of our communication becomes part of the clinical record, which is accessible to you upon request. I will keep confidential anything you say as part of our counseling relationship, with the following exceptions: (a) you direct me in writing to disclose information to someone else, (b) it is determined you are a danger to yourself or others (including child or elder abuse), or (c) I am ordered by a court to disclose information.

Complaints

Although clients are encouraged to discuss any concerns with me, you may file a complaint against me with the organization below if 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/CodeifEthics/TP/Home/CT2.aspx>). However, if you remain convinced that Professional Ethics have been violated, a formal complaint may be registered in writing. Appropriate Forms are available upon request from the North Carolina Board of Licensed Professional Counselors at:

North Carolina Board of Licensed Professional Counselors
PO Box 77819
Greensboro, NC 27417
Phone: (844)622-3572 or (336) 217-6007
E-Mail: nblpc@mgmt4u.com ;

or by visiting the web site and downloading a form at:

http://www.ncblpc.org/forms/10_Complaint_Form/Complaint_Form.pdf

Acceptance of Terms

We agree to these terms and will abide by these guidelines.

Client: _____ Date: _____

Counselor: _____ Date: _____

NAME _____

MR # _____

Before your appointment please feel free to review your therapist's professional disclosure statement and curriculum vita. You can also access this information on our web site by visiting: www.peace-of-mind-inc.com .

PROFESSIONAL DISCLOSURE ACKNOWLEDGEMENT:

Please feel free to ask questions at any time.

By signing below, you are agreeing that an opportunity has been provided to discuss any concerns you may have prior to committing to counseling. The invitation to open discussion will remain in effect throughout the relationship.

Client/Parent/Legal Guardian Signature

Date

Witness Signature

Date