**Tsz Yin Szeto-McNatt, Registered Intern**

**Grace Abounds Counseling, LLC**

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Tigard, Oregon 97223

Phone: (503) 446-3777

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Professional Disclosure Statement

**Philosophy and Approach:** It is an honor to build a safe and sacred space to begin the process of healing. I enjoy working with the marginalized experience of People of Color, immigrants, refugees and those navigating a bi-cultural experience. I work with individuals and couples on issues related to anxiety, depression, grief/loss, relationships, codependency, trauma, life transitions, infertility, self-worth/identity and communication skills. I also welcome conversations about spirituality and the integration of faith to facilitate growth.

I believe that we are comprised of psychological, physiological, relational and spiritual facets that are all interrelated. Therefore, an integrated counseling approach will help understand your story to bring awareness to the many facets that make up your varying identities. Weighing the risks and benefits of counseling can be a daunting step. For some, seeking counseling is a proactive step to resolve current challenges. For others, it is the last resort because all other methods have failed. I would like to support you wherever you are on your journey.

As a child, adolescent, and family therapist, I believe that no one can flourish in isolation and relationships influence a person’s life. As a result, I use a systems approach that examines how parents, family, caregivers and siblings can actively participate in counseling to support a child’s development and work through challenges. I also believe that Cognitive Behavioral Therapy paired with Acceptance and Commitment Therapy are practical and supportive interventions that can help create the necessary change that clients are striving for.

**Formal Education and Training**

I hold a Masters degree in Curriculum and Development from Brandman University and a Masters degree in Marriage, Couple and Family Counseling Therapy from George Fox University. I also earned a Bachelor’s degree in English Education from New York University. I have taught high school students for the last 20 years and now I primarily teach adults re-entering college.

As a registered intern registered **with the Oregon Board of Licensed Marriage and Family Therapists, I will abide by its Code of Ethics.** I am under the continued supervision of Mary C. Hennessy, a licensed professional counselor (License C1677 OR), and Dr. Michelle Engblom-Deglmann, a licensed marriage and family therapist (License T1004 OR), which I will be happy to explain.

**Custodian of Record**

In the event I become incapacitated, all client records will be the responsibility of my supervisors, Mary Hennessy and Dr. Michelle Engblom-Deglmann.

**Communication with Clients and Emergencies**

With your written permission, I may use email to communicate with you regarding scheduling matters. Please note that email is NOT a secure form of communication and that I cannot guarantee confidentiality of emails. Please do not send information via email that you wish to remain confidential or that requires immediate attention.

**Emergencies**

This clinician does not offer 24/7 emergency crisis support. If you have a life-threatening emergency, please call 9-1-1. For non-life threatening crises, you may contact one of the following crisis lines:

Multnomah County Crisis Line: (503) 988-4888

Crisis Text Line: 741-741

National Suicide Prevention Line: (800) 273-8255 or text ‘273talk’ to 839863

Call to Safety: (888) 235-5333

Project Respond Referral: (503) 988-4888

**Fees**

My fee for a 50-minute session is $100 for individual therapy. Family or couple therapy is $120 for a 50-minute session or $150 for an 80-minute session. I do provide a sliding scale, depending on income and ability to pay. 24-hour notice of cancellation is required so that I may arrange my schedule accordingly. The full fee of a session will be charged to the client when they have not given proper notification of cancellation for the second time and thereafter. Payment is due at the beginning of each session and cash or check is accepted.

**Use of Diagnosis**

Some health insurance companies will reimburse clients for counseling services and some will not. In addition, most will require that a diagnosis of a mental-health condition is made and indicate that you must have an “illness” before they will agree to reimburse you. 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 insurance records, and may have ramifications in terms of costs of insurance and long-term insurability.

**Ethics**

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

* To expect that the registered intern has met the qualifications of training and experience 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 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 student intern case consultation or supervision; and 5) Defending claims brought to 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**](mailto:lpct.board@state.or.us) **Website:** [**www.oregon.gov/OBLPCT**](http://www.oregon.gov/OBLPCT)

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

**Acknowledgement and Acceptance of Terms**

I have read and agree to these terms and will abide by these guidelines. I understand that I am free to ask questions or raise concerns at any point in the therapeutic process.

Client: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Client: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_