**Professional Disclosure Statement**

**Kevin W. Kelley, M.A., LPC**  
Christians as Family Advocates

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**Philosophy and Approach**: I provide mental health counseling for children, teens, and adults using Cognitive Behavioral Therapy and integrating Neurofeedback treatment when appropriate. I specialize in treating problems associated with life transitions, anxiety, depression, PTSD, and ADHD. I am skilled in helping clients improve emotional regulation, self-control, stress management, and building greater resiliency to the many stresses of life.

**Formal Education and Training**: I hold a Master’s Degree in Clinical Mental Health Counseling from Northwest Christian University. Major course work included: Ethics and Legal Issues; Personality and Counseling Theory; Human Growth and Development; Family Systems; Career and Lifestyle Development; Crisis, Trauma, and Grief Counseling; Addiction Issues in Counseling; The Helping Relationship; Counseling in a Multicultural Society; Pathology and DSM Diagnosis; Testing and Appraisal; and Research and Evaluation

**As a Licensee** of the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its Code of Ethics**.** To maintain my license I am required to participate in continuing education, taking classes dealing with subjects relevant to this profession.

**Fees:** In-Network with Oregon Health Plan (Trillium and Pacific Source).

**As a client of an Oregon licensee, 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**