

**Portland Insight Meditation Center
Meditation Training and Spiritual Guidance**

Robert Beatty: Guiding Teacher

Policies

Appointments: Individual meetings are scheduled by appointment and are fifty minutes long. Your appointment time is reserved exclusively for you and cannot be rescheduled on short notice. Missed appointments or those not canceled twenty-four hours in advance may be billed to you.

Robert is generally in his office Monday afternoons, and Tuesday through Thursdays 9 -7. Some exceptions are possible.

Fees: It is of the utmost importance that anyone who sincerely desires or needs guidance is able to receive it. PIMC charges from \$75 to \$150 for Robert's services. No one will be turned away for lack of funds. Payment is due at the time of the meeting.

Confidentiality: As a member of the clergy and with his adherence to the Buddhist Code of Ethics, communication between you and Robert is confidential. In order for him to release ANY information about you to other individuals or agencies he must get your written permission, which you may revoke at any time.

Information may be released without your consent only under the following extraordinary circumstances as outlined by law:

- when a court order is received. (Even then, in some cases, clergy may maintain greater confidentiality than psychotherapists).
- when there is reasonable cause to believe that child or elder abuse/neglect has occurred.
- when there is reasonable cause to believe that there is imminent danger to self/others

Telephone calls and emergencies:

My office phone is 503-223-2214. I return calls throughout the day Monday afternoon through Thursday evening.

If you are experiencing an emergency and must speak with me, I can often be reached by calling the number above and pressing "0". An operator will answer and either take a message or endeavor to contact me.

If you must speak with someone immediately, call the CRISIS LINE at 503-215-7082.

If you feel you cannot keep yourself safe, go to your health plan facility Emergency Room immediately or call 911.

I have read and agree to abide by the provisions of these policies. I have received my copy.

Signature: _____ Date: _____