



A SOUL MADE WELL

PASTORAL COUNSELING

Statement of Understanding & Consent for Treatment

AIM: The mission of *A Soul Made Well Pastoral Counseling* is to provide a safe and inviting environment for hurting, broken, & wounded individuals to come as they are, but through the power of the Holy Spirit at work in the counseling process, experience healing and wholeness of their minds, emotions, relationships, and souls.

BACKGROUND: I hold a BA from LIFE Pacific College and a MA in Clinical Pastoral Counseling from Colorado Theological Seminary with advanced certification in Crisis and Abuse Counseling. I've completed The Genesis Process Relapse Prevention class, Called to Peace Domestic Abuse & Covert Control Advocacy courses, and CTHN Trauma Care Provider certification. I value personal and professional growth and am committed to ongoing education, training, and skill-building.

CHRISTIAN-BASED: *A Soul Made Well* offers faith-based Christian counseling with Scripture, biblical principles, and prayer as foundational components along with therapeutic tools/resources.

CHRISTIAN CONCILIATION CLAUSE: The Bible commands that we make every effort to live at peace, and to resolve disputes through Biblically based mediation, rather than seek a lawsuit in a court room (see Matthew 18:15-20; 1 Corinthians 6:1-8). Therefore, in the event of a complaint against *A Soul Made Well*, I would ask that you choose to go through the proper church or Biblical mediation channels to pursue resolution.

CLINICAL DIAGNOSING/LICENSING: It is outside my scope of training to give clinical diagnosis of mental disorders since I am not a state licensed mental health therapist. I am commissioned by my church and licensed by and practice under the code of ethics of the National Christian Counselors Association (NCCA).

CONFIDENTIALITY: I value your complete privacy & confidentiality in our sessions, with the exceptions being:

- ❖ If abuse of a child, elderly, or a developmentally disabled person is suspected or reported.
- ❖ If the client is judged to be a danger/at risk of harming self or others.
- ❖ If client is a minor (It is a balance of providing a "zone of privacy" for the minor while at the same time respecting the parent's or guardian's right to information).
- ❖ If client's gravely disabled/in medical crisis & unable to grant permission for release of information.
- ❖ If client has signed a written Release of Information (ROI) authorizing said disclosure.

COUNSELING RISKS & BENEFITS: During the counseling process, it's common to experience unpleasant emotions and feelings of distress. However, clients who resolve to embrace vulnerability, feel their pain, and commit themselves to the work involved, are likely to reap the beautiful benefits of change, growth, & healing.

EXTENDED SESSION: There is a pro-rated fee for every 15-minute increment beyond the 60-minute session.

INSURANCE: *A Soul Made Well* is a private pay agency and does not bill insurance for services. You may be eligible for reimbursement if you have an HSA account.

LITIGATIONS & COURT HEARINGS: I will not testify in court, release counseling notes for divorce/custody cases, or make legal recommendations to the courts. If a situation arises, where my involvement in a litigation is deemed necessary, I charge \$150/hour for my services.

NOTE-TAKING: As a Pastoral Counselor, I do not write in-depth progress notes/treatment plans. I take basic notes for my own recollection. If you would like more thorough notes, please discuss this with me.

PAYMENT: I offer a “Payment Range” of \$85-\$150. Clients can evaluate their income and determine an amount that feels manageable to pay. Payment is due at the time of service unless other arrangements are made. Cash, checks, or debit/credit cards are accepted. For card payments, a card will be kept on file, to be charged after the session (*fees are added to card payments*). A \$25 late fee is added for each month of unpaid invoices, as well as a hold on further sessions until paid in full. Any balances of 90 days or older may be sent to a collection agency. A \$30 fee will be charged for any NSF check.

RESCHEDULING & CANCELLATION POLICY: A minimum of 24 hours’ notice is required to reschedule or cancel an appointment. When possible, I appreciate more than 24-hour notice, so I have adequate time to offer the session to another client. If less than a 24-hour notice is given or you are a no-call/no-show, I charge 100% of your normal session rate. **EMERGENCIES:** Fees are waived in emergencies involving a death in the family, car breakdown/accident, hospitalization, serious injury, contagious illness, or extreme weather. While I understand life can be unpredictable, childcare issues, work changes, or double-booking your schedule do NOT constitute an emergency. Any other reason for canceling with less than 24-hours’ notice, will be considered on a case-by-case basis. Keep in mind, telehealth is an option in lieu of canceling altogether.

TELEHEALTH: Please be in a quiet/private space for all phone or video sessions. If the focus of counseling pertains to domestic abuse or relational issues with anyone in your home, all telehealth appointments need to be in a separate location from the individual. This is to ensure confidentiality and confidence to talk freely and openly. For video, prop your device up on a desk or table, situated so I have a straight view of the front of your face. I reserve the right to end the session and charge the full rate if any of these requests aren’t honored.

TEXT/EMAIL COMMUNICATION: I respond to client communication Monday-Friday 8:00-6:00. Automated appointment reminders are emailed three days prior, and a personal text is sent the morning of your session. Resources or homework mentioned in the session will be sent in a follow-up email. Please discuss sensitive matters in-person or by phone, as privacy/confidentiality can be compromised if doing so by text or email.

WITHDRAWAL BY CLIENT: Clients have the right to end counseling at any time. However, for healthy closure, I do encourage a final face-to-face session. Otherwise, a written notification by email is appreciated.

WITHDRAWAL BY COUNSELOR: My goal is to ensure clients receive the best care possible, which means at times, a decision to refer elsewhere if: 1) The client’s needs warrant a higher level of care than I can provide. 2) A client is not benefitting from my methods. 3) The client’s issues create a dilemma or distress in me, which impacts counseling efficacy. 4) The client’s needs have shifted and now fall outside of my areas of focus or expertise. Additionally, I reserve the right to terminate counseling when: 5) A client demonstrates inappropriate or unsafe behavior. 6) A new client cancels at the last minute or is a no-call/no-show to the initial intake appointment. 7) An active client has repeated cancellations or no-shows.

WRITING LETTERS: I am not a medical doctor, mental health therapist, or legal advisor; therefore, it is out of my jurisdiction to write a letter on a client’s behalf regarding things such as: a diagnosis of a mental disorder, physical disability, inability to work, legal recommendations, or eligibility for a service animal. In situations where I feel it is appropriate to write a letter, the fee for any non-court related letter is \$100/hour.

MY SIGNATURE BELOW affirms my informed and voluntary consent for myself, or my teenager, to enter counseling with *A Soul Made Well Pastoral Counseling*. I have read, understand, and agree to the preceding policies and procedures, and I have been offered a copy for my records.

Client Signature

Date

Printed Name