



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, and wounded individuals to come as they are, and through the power of the Holy Spirit at work in the counseling process, experience emotional, relational, and spiritual healing and restoration.

BACKGROUND: I hold a BA from LIFE Pacific College and an MA in Clinical Pastoral Counseling from Colorado Theological Seminary with advanced certification in Crisis and Abuse Therapy. I've completed The Genesis Process Relapse Prevention class, Called to Peace Domestic Abuse & Covert Control Advocacy courses, and CTHN Level 2 Trauma Care Provider certification. I am committed to ongoing professional education, training, and skill-building.

CHRISTIAN-BASED: *A Soul Made Well* offers faith-based Christian counseling in which Scripture, biblical principles, and prayer are foundational, integrated with therapeutic tools and educational resources.

CHRISTIAN CONCILIATION CLAUSE: The Bible calls us to make every effort to live at peace, and to resolve disputes through Biblically based mediation (Matthew 18:15-20; 1 Corinthians 6:1-8). In the event of a complaint, clients are encouraged to first seek resolution through direct communication and, if necessary, Christian mediation. However, this clause does not waive your legal rights under state or federal law.

CLINICAL DIAGNOSING/LICENSING: I am commissioned by my church and licensed by and practice under the code of ethics of the National Christian Counselors Association (NCCA), providing pastoral counseling and spiritual guidance. I am not a state licensed mental health therapist and do not provide clinical diagnosis of mental disorders. Services are pastoral in nature and are not a substitute for mental health treatment, medical care, or legal advice. Referrals will be provided if such services are needed.

CONFIDENTIALITY: Your privacy & confidentiality is respected, with exceptions as required by law including:

- ❖ Suspected abuse of a child, elderly, or a vulnerable adult with disabilities.
- ❖ If a client presents a credible threat of harm to self or others.
- ❖ If a client is gravely disabled, in medical crisis, or otherwise unable to grant permission for release of information.
- ❖ When a signed Release of Information (ROI) is provided.
- ❖ If a disclosure is required by subpoena, court order, or other legal obligation.

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 counseling practice and does not bill insurance. Clients may be eligible for reimbursement through a Health Savings Account (HSA).

LITIGATION & COURT HEARINGS: I do not voluntarily participate in litigation. If I am subpoenaed or legally required to participate, my fee is \$150/hour, including preparation, travel, and court time.

NOTE-TAKING: I maintain brief pastoral counseling notes for continuity of care. These are not clinical diagnostic or treatment records. If detailed documentation is needed, please discuss this with me in advance.

PAYMENT: I offer a “Payment Range” of \$85-\$150 per 60-minute session. Clients determine an amount within that range that feels manageable to pay. Payment is due at the time of service unless other arrangements are made. Accepted forms of payment include cash, checks, or debit/credit cards (*processing fees apply; card kept on file and charged after session*). An additional fee of \$25 will be charged for emergency sessions outside my regular office hours. A \$25 late fee is applied to unpaid monthly balances, and sessions may be paused until the balance is paid in full. Accounts 90 days past due may be sent to collections. A \$30 fee will be applied for returned checks.

RESCHEDULING & CANCELLATION POLICY: A minimum of 24 hours’ notice is required to reschedule or cancel. Less than 24-hours’ notice or no-shows are charged 100% of the session fee. **EMERGENCIES:** Fees are waived in emergencies (death in the family, car breakdown, accident, hospitalization, serious injury, contagious illness, or extreme weather). Childcare conflicts, work changes, or scheduling errors are not considered an emergency. Telehealth may be used in lieu of cancellation when appropriate.

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. Telehealth services are subject to potential technological risks despite reasonable safeguards.

TEXT/EMAIL COMMUNICATION: I respond Monday-Friday 8:00 am-6:00 pm. Automated email reminders are sent three days prior, and a personal text is sent the morning of your session. Sensitive matters should be discussed in-person or by phone, as electronic communication is not guaranteed to be secure

WITHDRAWAL BY CLIENT: Clients may discontinue counseling at any time. A final session is encouraged for closure or written notification by email is appreciated.

WITHDRAWAL BY COUNSELOR: I may refer out or terminate services if: 1) A higher level of care is required. 2) Counseling is not clinically beneficial. 3) A client’s issues create a professional dilemma or personal distress that impacts my ability to provide effective and objective care. 4) Needs fall outside of my areas of focus or expertise. 5) Unsafe or inappropriate behavior occurs. 6) A new client cancels last minute or is a no-show to the initial intake appointment. 7) Repeated cancellations or no-shows occur.

WRITING LETTERS: I do not provide letters diagnosing mental disorders or determining physical disability, inability to work, legal recommendations, or eligibility of 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. All letters are based solely on information shared in sessions and do not constitute clinical evaluations or professional diagnoses.

MY SIGNATURE BELOW affirms my informed and voluntary consent for myself 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