

Good Healer Christian Counseling

Client Informed Consent

Philosophy: I am a Christian counselor who uses both the wisdom that God has given us through His Word and the wisdom that man has produced over time through trial and error. Though I am a Christian, I will work to meet you where you are and respect your religious views.

Counseling Relationship: Counseling sessions will last for approximately 50-55 minutes for adults and 30-45 minute for minors based on their attention span. The counseling contact will be limited to the counseling sessions that are scheduled in advance. Because of professional ethics, phone contact will need to be minimal as phone counseling is not an area of training for this counselor. Please make sure to write down your appointment date and time at time of session, as contact is limited during non-business hours. Texts can be sent to 903-920-9004, and you may email at jasonbienlpc@aol.com. Texts and email received after business hours will be responded to on the next business day.

Effects of Counseling: Counseling is a personal exploration and may lead to major changes in your life perspective and decisions. These changes may affect significant relationships, your job, and your understanding of yourself. The exact nature of these changes cannot be predicted, and some may be temporarily distressing. We will work together, as a team, to achieve the best possible results for you.

Client Termination: Some clients need only a few sessions to achieve their goals while others require months and sometimes years of counseling. You are in complete control and may end counseling at any time, though I do ask that you participate in a termination session.

Counseling Minors: It is important that your child is able to establish a trusting relationship with their counselor; therefore I will only give parents my opinion about my interaction with their child and will not go into specifics unless I deem it necessary. If the child discloses something that needs to be shared with a parent, I will first prompt the child to share it with the parent in session before disclosing directly to a parent. Since issues often come up regarding parents during these sessions, it is imperative that the parent be willing to address these issues and make appropriate changes based on the recommendation we discuss.

LPC-S -Licensed Professional Counselor Supervisor: This is the designation I hold with the state of Texas. To achieve this licensure, the requirement of a Master's degree in counseling, many supervised hours in the Southwestern clinic, and three thousand counseling hours after graduation under a state licensed supervisor was needed. In addition to a Master's degree in Marriage and Family Counseling, I also hold a Master's degree in Christian Education. Hopefully

this will answer any questions regarding experience or education. If you have any other questions regarding this, all questions can and will be answered in session.

Referrals: Should you or your counselor believe a referral is necessary, alternative counselors or programs will be provided to assist you. You will be responsible for contacting and evaluating each service according to your individual needs.

Fees: As of January 1, 2024 Good Healer will offer the following self-pay counseling rates: \$130.00 for the initial assessment session. Each additional session will be based on combined household income; \$100.00 per session for those who make \$80,000 a year or less, \$130.00 per session for those who make more than \$80,000. For insurance clients, applicable co-pay rates apply. Check with your counselor to see if your insurance is accepted. *The fee for each session must be paid at the beginning of each session.* Please make note that a 24 hour advance notice is needed when cancelling a session. Emergency cancellations will be considered on a case by case basis. *If 24 hours is not given, this counselor reserves the right to charge for the missed session* before making future appointments.

Records and Confidentiality: All communication between you and the counselor will become part of the clinical records. All LPC records may be staffed between counselors in the Good Healer offices to better facilitate the best treatment for you. Adult records will be disposed of seven years after sessions are terminated. All minor's records will be kept until five years after the minor turns eighteen. In case of emergency, death, or retirement of this counselor, all records will go to Jennifer Wood, LPC. All communication is confidential with these exceptions:

1. If it is determined that you are a danger to yourself or someone else. _____
2. If you disclose abuse or neglect or any exploitation of a child, elderly, or disabled person. _____
3. If you disclose inappropriate behavior by another mental health professional. _____
4. If a judge (not a lawyer) asks for you records to be opened for any reason. _____
5. If you ask your counselor to release your records to another mental health professional. _____

In addition to these that are required by law, when conducting marriage counseling, the counselor reserves the right to disclose information discussed in individual sessions with the corresponding spouse if deemed necessary for the health of the marriage. _____

Future Litigation: Since it is important to maintain the confidentiality of the client(s) both now and in the future, the undersigned agrees not to involve the counselor in any current or future

litigation within the court system. If the counselor is called to testify for any reason, a fee of \$3000.00 per day plus expenses will be billed to the client in advance of the court date.

By your signature below you are indicating that you have read and understand this consent form, and/or that any questions you have about this statement were answered to your satisfaction. Please print a copy of this document for your personal records.

Signature of the client (or guardian if minor)

Printed Name

Date

Phone number

Email