

# *Christian-Counseling-Solutions*



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## **Professional Disclosure Statement and Consent for Treatment with J. Mark McClamrock, MDiv, MAPC, LCMHC**

I am thankful to have the opportunity to work with you as your counselor. This document is designed to inform you about my background and to ensure that you understand all the issues involved in the counseling relationship.

I received a Master of Divinity degree from Columbia International University, Columbia, SC, in 1991. I have been an ordained minister since that time and continue serving as a minister of a congregation today. I completed a Master's degree in Professional Counseling from Liberty University, Lynchburg, VA, in 2012. I have experience in counseling for over 30 years as a pastor, and thousands of hours in training and supervision for licensure since 2013. As of April 2017, I am fully licensed by the North Carolina Board of Licensed Clinical Mental Health Counselors (License #10119).

### **COUNSELING SERVICES AND THEORETICAL APPROACH**

Counseling is a process by which we will identify problematic issues in your life and seek solutions that promote healing. As a Christian counselor, my approach to the counseling process is one of integration. This means bringing together God's truth found in the Bible and His creation. All truth is God's truth, wherever it may be found, but the Scriptures are the only infallible rule for faith and practice. Thus, Scripture must be the foundational authority in counseling. Other conclusions and observations from the human sciences (ex. psychology) are useful and necessary, but they must always be subject to the authority of Scripture to help in the counseling process. My theoretical approach is "Cognitive-Behavioral." This theory is well established, researched, and respected within the counseling profession. We will examine how thoughts and emotions influence behavior and determine together, where adjustments may need to be made to bring about healing. This will involve establishing goals, developing a plan to achieve those goals, and working together to see you accomplish them. Periodically, we will evaluate our progress and, if necessary, redesign the goals, the plan, or the methods in seeking to accomplish the goals. There may be aspects of other theories that are incorporated into the process but we will discuss those when they apply. I have experience working with adults (individuals/couples), adolescents, and families. My experience ranges from work with pre-marital and marriage counseling, family issues, relationship issues with teenagers and adults, work related difficulties, career counseling, personal growth and encouragement, mood disorders, anxiety disorders, adjustment disorders, grief, and depression.

Counseling includes your active involvement, as well as, efforts to change your thoughts, feelings, and behaviors to promote healing. You will need to work both in and out of the counseling sessions. There is no instant, painless, or passive cure! Instead there will probably be some homework assignments, exercises in session, and other projects that may be helpful as we discuss them. Sometimes change can be swift and easy, but more often it will be slow and deliberate and effort may need to be repeated. As with any intervention, there are both benefits and risks associated with counseling and therapy. Risks might include experiencing uncomfortable levels of feelings like sadness, guilt, anxiety, anger, frustration, or having difficulties with other people. The benefits include discovering a more lasting peace and a deeper level of satisfaction in your personal life and relationships that accompany overcoming destructive and hurtful patterns of behavior.

### **CONFIDENTIALITY**

The personal information you share with me is protected under the Health Insurance Portability and Accountability Act or (HIPAA) law. Please read the separate HIPAA information form and become familiar with how your personal information will be handled. Please sign the HIPAA notice. All information you share and the work we do in the counseling process is kept in professional confidence. There are five exceptions to professional

confidentiality that you need to understand. The first involves receiving payment from a third-party payer. Insurance companies require information about the services rendered – this may involve listing a diagnosis which would become a part of your permanent record. You need to be aware of this when deciding to bill your insurance. The next two exceptions include instances of child or elder abuse and any plan to harm yourself or others. I am required to report these to the appropriate authorities. You may also direct me to disclose information to someone else. Finally, I may be required to disclose information by court authority.

### **COUNSELING SESSIONS/FEE/METHODS OF PAYMENT**

Appointments will be scheduled by phone at an agreed upon time and date. Sessions will last 50 minutes with 10 minutes for documentation and scheduling. All appointments missed without 24-hour notification may be charged the full fee.

The regular fee for services is \$30.00/hr. If there is a situation of financial hardship, then at the initial assessment we will discuss the issue and agree on a sliding scale fee of \_\_\_\_\_ based on that information. Additional assistance may be available through your church if you attend one. Cash, personal checks, and credit cards are acceptable methods of payment at the time services are rendered. I do realize that there are times that a temporary financial problem may affect your payment of your account. In that case, PLEASE, contact the office for assistance so that we may be able to set up payment options for you. Insufficient Funds: Any check returned for insufficient funds should be taken care of by the client before the next session.

*Please be aware that your balance must be kept current. If, at any time, your balance exceeds the agreed payment amount for two sessions, services may be suspended until the balance is paid and/or you develop a balance reconciliation plan with me.*

### **ASSESSMENT AND REFERRALS**

Your initial session is an Assessment and may be 60-75 minutes long. After your initial assessment, we will evaluate your situation together and seek to determine the best course of action for your needs to be met. I will make referrals to other professionals or agencies when appropriate for your care and/or circumstances.

### **CONTACT NUMBERS**

The office telephone number is (980) 255-8678. When there is no answer, you may leave a message on the voice mail. If you are experiencing an emergency or are in crisis and need immediate assistance, please call 911 or go to the nearest Emergency Room.

### **COMPLAINT PROCEDURES**

If you are dissatisfied with any aspect of my work, please inform me immediately. This will make our work together more efficient and effective. If you believe that you have been treated in an illegal or unethical way by me, and cannot resolve this problem, you can contact the North Carolina Board of Licensed Clinical Mental Health Counselors at P.O. Box 77819 Greensboro, NC 27417 or by phone at (844) 622-3572 for clarification of your client's rights or to lodge a complaint. I abide by the ACA Code of Ethics (<http://www.counseling.org/Resources/aca-code-of-ethics.pdf>).

### **CONSENT FOR TREATMENT**

Your signature below signifies that you have read and understand the above document and allows treatment to be rendered to you or a minor under your custodial or parental care.

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Client's Signature (If under 18, Parent's Signature)

Date

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Counselor's Signature

Date