

Disclosure Statement

Julia Nelson, MA, LCMHCA, MFTA (A11981, 11051A)

828.513.6491

NelsonChristianCounseling.com

The following information is designed to give you information about the counseling process. Please read and sign at the bottom to indicate you have reviewed this information.

Qualifications

I received my Master of Arts Degree in Professional Counseling from Liberty University in 2015. I graduated with a Bachelor of Science in Psychology with a minor in business also from Liberty University in 2013. I am also a certified PREPARE/ENRICH Facilitator which includes premarital and marital counseling. I am an Emotionally Focused Couples Therapist, Parenting the Love and Logic Way Facilitator and a Certified Clinical Military Counselor. In some aspect, I have been counseling and or mentoring couples and individuals for the past four years and have over 2000 hours of counseling experience.

Restricted Licensure

I am currently licensed as a Licensed Clinical Mental Health Counselor Associate (LCMHCA) and a Licensed Marriage and Family Therapist Associate (LMFTA) in North Carolina. As an associate, I have a supervisor, Beth Starling, LPCS that I review cases with while keeping the client's information confidential. I may also from time to time discuss cases in general terms with colleagues, again maintaining client confidentiality.

Counseling Background

I have worked with women in domestic violence situations, and adults of all ages with various issues from anxiety, depression, addictions, to developing life and social skills. I have also led substance abuse, domestic violence awareness, marriage, parenting and family groups. I offer services from an eclectic approach using multiple theories including Cognitive Behavioral Therapy, Solution-Focused, and Brief Therapy believing the client is the authority of themselves. I use Emotionally Focused Therapy for marital and couples counseling to build and restore relationships. I will at times assign homework to reinforce new behaviors.

Counseling Philosophy

I believe that for counseling to be effective, both you and I must be actively involved in developing counseling goals and assessing progress. Efforts to change self-perception, emotions, and behaviors require work both in session and out of session. Some change will occur quickly and easily, but more often change requires slow, deliberate, and repeated efforts. You should be aware that while counseling interventions offer potential benefits, they also present possible risks. Such risks might include uncomfortable feelings of sadness, guilt, anxiety, anger or frustrations as you discuss unpleasant aspects of your life, or experience difficulties with other people as you change. Furthermore, because of your personal growth, you might experience feelings of discomfort until you adjust to the changes within and they become a routine part of your life. Nevertheless, weigh the potential risks against the benefits, which might include such assets as gaining insight into your problems, developing coping skills and resources, and changing yourself so that participating in life's daily activities generally becomes a more positive experience.

Fees, Payments and Cancellations

Individual and couple sessions are generally 50 minutes in length and fees are \$85 for each session. Initial session, family sessions and requested extended sessions of 1.5 hours in length are \$125 per session. Extended session may be requested at any time. Premarital counseling is \$500 for 6-8 one-hour sessions. **All payments are due at the end of the service.** Sessions may be paid for by cash, check or credit card. A \$40 fee will be charged for all returned

checks. Appointments that are canceled, forgotten, or not kept will cause the therapist to lose an hour or two and it denies other clients the opportunity to take these time slots. **If you must cancel or reschedule, please give 24-hour notice. The full fee will be charged for missed appointments or when less than 24-hour notice is given. Also, if you wish to end counseling, please discuss this with me and do not just fail to show up for your session.**

Use of Diagnosis

I may, if necessary for insurance purposes render a mental health diagnosis for you to file an insurance claim. This must be requested by the client. I do not file insurance claims on your behalf.

For Couple’s Counseling

Emotionally Focused Therapy (EFT):

EFT is a relatively short-term, structured approach to couples therapy formulated by Drs. Sue Johnson and Les Greenberg in the early 1980’s. A substantial body of research outlining the effectiveness of EFT now exists. This research demonstrates that couples significantly improve over the course of treatment and continue to get better at 2-year follow-up. For further information about the treatment model and additional outcome research, please refer to the website: www.eft.ca.

The goals of EFT are:

- 1. to expand and reorganize key emotional responses;
- 2. to create a shift in partners’ interactional patterns with one another;
- 3. to foster the creation of a secure bond between partners

Consent for EFT Consultation:

To provide the best possible treatment for you, it is required for me to participate in supervision and/or training groups with seasoned mental health professionals on a regular basis. I may sometimes use segments of my confidential sessions with clients to demonstrate the specific steps and stages of EFT.

With your consent, I may present your case to a supervisor or small group of therapists via audio or video tape. Typically, a short segment of your confidential session will be shown along with a summary of the presenting problem and relationship history. At no time is any identifying information presented to the supervisor or training group members. You may revoke consent in writing at any time to have your session(s) recorded.

By law, all mental health professionals in supervision or training groups must follow the same confidentiality guidelines as I do. Furthermore, if by chance a consultant or member of the training group were to know you, they would be asked to leave the group immediately and would not be permitted to participate in that portion of the meeting involving your case.

Your case information and the copy of your recorded session will remain with and be protected by me and will never be reproduced or shared with anyone, other than as outlined above.

By initialing below, I give my consent to allow a small and designated segment of my confidential therapy session(s) with Julia Nelson to be:

- _____ a) recorded via audio and/or video and used solely by Julia Nelson for her private review
- _____ b) used as described in paragraph "a" above, and also used solely by Julia Nelson for EFT training and/or supervision, in which case the segment may be seen and/or heard by a small and select group of therapists.

For All Clients

Confidentiality

All our communication becomes part of the clinical record, which is accessible to you upon request. I will keep confidential anything you say as part of our counseling relationship, with the following exceptions: (a) you direct me in writing to disclose information to someone else, (b) it is determined you are a danger to yourself or others (including child or elder abuse), (c) I am ordered by a court to disclose information and/or (d) to review cases in general terms with my supervisor who is also required to maintain confidentiality as required by North Carolina law.

Complaints

I abide by the ACA Code of Ethics ([http:// www.counseling.org/Resources/aca-code-of-ethics.pdf](http://www.counseling.org/Resources/aca-code-of-ethics.pdf)). If at any time you feel that you have been treated unethically, please let me know. If talking with me does not bring a satisfactory solution to the problem, you have the right to contact my supervisor, Beth Starling at 828-236-9471 or the North Carolina Board of Licensed Clinical Mental Health Counselors, P.O. Box 77819 Greensboro, NC 27417, telephone # 844-622-3572 or E-mail: Complaints@ncblpc.org. Or you may contact the NC MFT Licensure Board 1135 Kildaire Farm Road, Suite 200, Cary, NC 27511, phone 919-654-6914.

Phone and Emergency Contact

If you try to contact me by phone and I am not available, please leave a message on my voice mail. I return calls within 24 hours. If a call lasts for more than 10 minutes, I will charge you \$40. If you are unable to reach me in an emergency, contact First Call (211) or go the emergency room of the nearest hospital.

Acceptance of Terms

I/We agree to these terms and will abide by these guidelines as indicated by my signature.

Client: _____ Date: _____

Client: _____ Date: _____

Parent/Legal Guardian: _____ Date: _____

Counselor: _____ Date: _____