

COUNSELING AGREEMENT

**Village Presbyterian Church
Dave Ehman, Ph.D.
Licensed Psychologist**

This brief document represents an agreement between you, Village Presbyterian Church and Dr. Dave Ehman, who will serve as your counselor. You may revoke this agreement in writing at any time and that revocation will be binding on us unless we have taken action in reliance on it prior to your request.

THE COUNSELING PROCESS

Counseling is not easily described in general terms. It varies depending on the personalities of the counselor and client, and the particular problems of the client. It calls for a very active effort on the part of both client and counselor. Counseling can have risks as well as benefits. Since it often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness, and helplessness. On the other hand, it has also been shown to have many benefits such as better relationships, solutions to specific problems, and significant reductions in feelings of distress. But there are no guarantees of what you will experience. In general, the return from counseling is as good as one's investment in the process.

Counseling offered through the church is limited in its scope and duration due to the limited hours available. A referral can be made to an appropriate professional if your needs require long-term counseling.

FEES

Although the cost of counseling is highly subsidized by Village Presbyterian Church, a suggested fee of \$65 will be expected at the time of counseling. Checks are payable to Village Presbyterian Church. We do not want to turn anyone away. If the \$65 fee is unrealistic for your budget, together we can work on a sliding scale. The fee paid to the church is not tax-deductible because you will be receiving a service from the church. *It is also important to understand that your counseling is not a coverable service by any health insurance plans and cannot be filed for insurance reimbursement.* We can help you with a referral if you wish to use your insurance to underwrite the cost of your counseling.

MEETINGS

Meetings will take place at the church in the Bride's Room near the Chapel. You will schedule your appointments directly with Dr. Ehman at (816-756-1227). The sessions run for 45-minutes and are typically scheduled on a weekly basis, though they may be scheduled more or less frequently according to your needs.

LATE CANCELLATIONS/NO SHOW

Should you need to cancel or reschedule an appointment you are asked to provide 24 hours advance notice so that your time can be given to another person. A fee of \$25 is charged if the request to reschedule is less than 24 hours or if there is a failure to keep the appointment.

CONTACT INFORMATION

Your counseling can be coordinated through the Pastoral Care Department at the church or you may contact Dr. Ehman directly at (816-756-1227). Due to Dr. Ehman's work schedule, he is often not immediately available by telephone. He does not take calls when counseling but will make every effort to return your call on the same day that you make it, with the exception of weekends and holidays. If you are difficult to reach, please inform him of times when you will be available to receive a call back. If he is not immediately available in an urgent situation please contact your family physician or the nearest emergency room and ask for the doctor on call.

LIMITS ON CONFIDENTIALITY

The law protects the privacy of all communications between a client and their counselor. In most all situations, information about your counseling can only be released to others if you sign a written Authorization Form that meets certain legal requirements imposed by HIPAA. Dr. Ehman may occasionally find it helpful to consult other health and/or mental health professionals to coordinate care. During a consultation, he avoids revealing the identity of the client and those consulted are legally bound to keep personal health information confidential.

The following are some unusual situations in which confidentiality does not apply:

- If there is reasonable cause to suspect that a child has been or may be subjected to abuse or neglect, or if a counselor observes a child being subjected to conditions or circumstances that would reasonably result in abuse or neglect, the law requires that a report be filed with appropriate authorities.
- If there is reasonable cause to suspect that an elderly or disabled adult presents a likelihood of suffering serious physical harm and is in need of protective services, the law requires that a report be filed with the appropriate authorities.
- If Dr. Ehman believes that it is necessary to disclose information to protect against a clear and substantial risk of imminent serious harm being inflicted by the client on him/herself or another person, he may be required to take protective action. These actions may include initiating hospitalization and/or contacting a potential victim, and/or the police and/or the client's family. If such a situation arises, he will make every effort to fully discuss it with you before taking any action and will limit his disclosure only to what is necessary.

Further elaboration of confidentiality is spelled out in the HIPAA form that will be given to you prior to your beginning counseling. Please feel free to raise any concerns you may have about confidentiality or the counseling process with Dr. Ehman at any time.

ADMINISTRATION

For the purposes of accounting, the head of the Pastoral Care Staff only will have the name of the client, the frequency of the sessions and the fee. This information is maintained confidentially by the head of the Pastoral Care Staff. Any concerns about this administrative procedure can be discussed with Dr. Ehman so that you may remain assured that your privacy is protected.

PASTORAL CARE

The pastoral staff of Village Presbyterian Church is also concerned about you and your spiritual journey. From time to time they might inquire about your well-being. Dr. Ehman will discretely share with the pastoral staff information that will assist them in their pastoral care duties. You may, however,

inform Dr. Ehman that you would not want any discussion of your concerns discussed with the pastoral staff and he will honor that. Please indicate your preference by initialing one of the choices below:

Dr. Ehman may share discrete pastoral information _____ Yes _____ No

YOUR SIGNATURE BELOW INDICATES THAT YOU HAVE READ THIS AGREEMENT AND AGREE TO ITS TERMS. IT ALSO SERVES AS AN ACKNOWLEDGEMENT THAT YOU HAVE RECEIVED THE HIPAA NOTICE REFERENCED ABOVE.

Signature

Date

Witness

Date