

Center for Pastoral Counseling of Virginia

Covenant of Understanding Informed Consent

WHO WE ARE

Center for Pastoral Counseling of VA (CPC) is comprised of counselors who seek to bring opportunities for healing to persons and relationships by integrating the ancient wisdom of faith traditions into contemporary psychological understanding of the human experience. We recognize the diversity of religious and spiritual perspectives and respect and appreciate the rights of persons to grow in their chosen spiritual paths. Please see our website for a listing of counselor credentials.

CONFIDENTIALITY/CODE OF ETHICS/HIPAA

Each CPC counselor is committed to the professional standards and codes of ethics of our respective credentialing organizations. CPC counselors also practice in compliance with federal HIPAA requirements with regard to your confidentiality. Content of counseling sessions is confidential, except in certain emergency situations, when a counselor may be required by law to act to keep you or another person safe. Please see our Notice of Privacy Practices and discuss the legal limits of confidentiality with your counselor. Your signature below affirms that you have reviewed the CPC Notice of Privacy Practices.

SUPERVISION

CPC counselors engage in supervision and consultation as part of a commitment to best practice. When your care is discussed with a supervisor, your identity and privacy are protected. If your counselor refers you to a professional outside of CPC, you may be asked to sign an authorization to release information to help us coordinate your care.

ELECTRONIC COMMUNICATION/ELECTRONIC HEALTH RECORD (EHR)

Due to the nature of electronic communications such as email, mobile telephone conversations and text messages, content cannot be guaranteed to be 100% private and confidential. If clients consent to the use of electronic communication, they acknowledge that they are responsible for maintaining the security and confidentiality of their devices and accounts.

If you communicate confidential or private information via email/text or other electronic methods, we assume that you have made an informed decision, and will honor your desire to communicate on such matters electronically. Please be aware that emails/texts received from clients and former clients along with any responses that are related to treatment and diagnosis may be electronically stored or printed out and kept in respective treatment records. Your signature below indicates that you are aware that any electronic correspondence between you and your therapist may become a part of your legal medical record.

Please also be aware that CPC uses an EHR, called Simple Practice, to maintain client records and a client portal that allows for a secure form of communication. Simple Practice is a HIPAA compliant, encrypted, cloud-based practice management system designed to maintain confidential records. Any paper records are maintained in HIPAA compliant securely locked storage. While no provider can guarantee the complete security of any electronic form of communication or storage of confidential records, our counselors do all that they can to ensure your confidentiality and privacy. Your counselor will talk with you about the forms of communication that are most appropriate for your treatment and will do their best to address any concerns about our use of an EHR or electronic communication.

FEES

The top of the CPC fee scale is \$200 per 50-minute session. Because our goal is to provide affordable counseling services, your fee will be established on a sliding fee scale according to family income, size and financial situation. Payment is expected at each session even when the fee may be insurance reimbursable. Checks should be made payable to CPC. Your counselor will provide you with a monthly statement listing that month's services, fees, payments, and account balance. You are responsible for understanding your insurance agreements and for filing for reimbursement of fees. CPC will charge

professional fees (not subject to the sliding scale) for evaluations, summaries of treatment, consultations, or any services requested by other professionals.

APPOINTMENTS

Counseling appointments are generally 50 minutes. CPC requires that you notify your counselor at least 24 hours in advance if you cannot keep your scheduled appointment. It is CPC policy to charge the full fee for sessions cancelled with less than a 24hour notice or for sessions missed without notification. In case of emergency circumstances, your counselor may discuss waiving this fee. You may contact your counselor or the CPC office by using the 24 hour voice mail system (703-903-9696) or the alternative means provided by your counselor.

IN CASE OF EMERGENCY

CPC does not provide emergency services. Should an emergency arise, please dial 911 or go to your local hospital emergency department or Community Mental Health 24 hour crisis unit.

YOUR RIGHTS AND RESPONSIBILITIES FOR INFORMED CONSENT

Like all forms of medical and psychological services, counseling comes with potential risks and rewards. It is up to each person to make an informed decision about what is best for their own care. You have the right to ask your counselor any questions about your treatment, and it is your responsibility to determine whether the counseling is helpful to you. Please discuss with your counselor any concerns you have about the course or methods of counseling. You have the right to terminate counseling at any time. If you cannot obtain satisfaction in discussing questions and concerns with your counselor, you may direct any concerns or issues to the Chair of the Clinical Services Committee at 703-903-9696.

BY SIGNING BELOW YOU ARE CERTIFYING THAT YOU HAVE READ, UNDERSTOOD, AND AGREE TO THE ABOVE POLICIES.

Printed Name

Date

Signature

Relation to Patient: Self Parent Guardian