



## **Welcome!**

I want to serve you well by making the process of engaging in counselling as clear as possible. This document explains my philosophy of counselling, what you can expect, and outlines the scope of my services. Your signature at the end will serve as consent to the counselling relationship. Please feel free to ask any questions you have before signing.

## **Philosophy, Principles and Practice**

- I believe every person has profound dignity, made in the image of God. My counselling approach takes into account the whole person, body and soul, as I seek to hear and understand deeply. This allows me to identify the particular sufferings, challenges, and pains that are unique to you and your situation.
- The reality of living in a broken and fallen world creates suffering and pain in our lives. I hope to provide a safe and loving place to explore the ways in which our view of self interacts with our life history, especially painful experiences, often setting up damaging patterns of behaviour that attempt to hide the pain and shame that we feel. This allows us to explore the ways that the grace and truth of the gospel, God's unmerited favour, speak to these patterns, and find a pathway and hope for change.
- Looking together at your life and situation - past, present, and anticipated future - we will consider what practical steps of faith will look like. God's unmerited favour upends our view of self and provides a redeemer who identifies with our suffering and covers our shame. Plans to pursue change will grow out of a deepening knowledge of and faith in the living Redeemer.
- Although I use biblical categories to frame my process, this does not mean that I believe Scripture is exhaustive. I seek to be well informed of, critically engage with, and be challenged by secular models, in order to sharpen my thinking and improve my practice.

## **Length and Process of Counselling**

I aim to complete formal counselling in a timely manner, so as to steward time and money faithfully. While the need for support in community never ends, our formal counselling relationship will be temporary. Many people see significant change within 8-10 sessions, although some counselling relationships will be shorter than this, and others will be longer. There is always a risk of emotional side effects from counselling and some symptoms may worsen before they get better. Please speak with me if you have any concerns about the process.



## **Qualifications, Supervision and Confidentiality**

I have a Master of Arts in Counseling from Westminster Theological Seminary, and am a provisional member of the Christian Counsellors Association of Australia (Membership Number: 201408).

I will do all I can to protect your anonymity and privacy and your personal information is stored in my practice management software which meets Australian healthcare practice standards.

Unless you give express written permission to do so, I may not talk about your situation with anyone. Exceptions to this are covered by the NSW mandatory reporting laws regulated by the Children and Young Persons (Care and Protection) Act 1998. I also regularly consult with a supervisor and other counsellors to improve the quality of counselling I offer. However, if your situation is discussed during supervision or training meetings, identifying information will be changed to protect your privacy.

## **Your Rights and Responsibilities as a Counsellee**

- You have the right to know of my qualifications as a counsellor.
- You have the right to discuss with me possible outcomes and side effects of any care you receive, an estimate of the predicted length, cost, and goals of that care, as well as alternative options to it.
- You have the right to ask me about and/or refuse any counselling interventions used.
- You have a responsibility to be on time for appointments, to participate actively in them and to give me feedback about your progress and how satisfied you are with it.
- If you are dissatisfied with the way your counselling care is going or believe that your rights as a counsellee have been violated please tell me.

## **Biblical Counsellor's Rights and Responsibilities**

- I have a responsibility to be ethical in provision of counselling services, to be on time for appointments, to follow appropriate counselling procedures, and to refer you to another counsellor if I determine that I cannot provide the services you require.
- I have the right to refuse any specific form of counselling you may request if I believe it is not in your best interest, or if I do not feel that my training qualifies me to provide it.
- I have the right to terminate counselling with you if I believe that you are not benefiting from care. However, this will only happen after a conversation between us has taken place.
- In emergencies I cannot guarantee that you will quickly reach me. In case of a medical emergency, please call 000. It is your responsibility to seek the appropriate resources in emergency situations. Alternatively, you can ring Lifeline's Crisis Support Line on 13 11 14
- If you choose to communicate with me via e-mail or texting, please note that I cannot ensure confidentiality of communication via these media.



## Fees

Counselling sessions for individuals and couples are typically 50 minutes long. My counselling fee for initial sessions is AUD \$115. Follow-up consultations are AUD \$105. You will be invoiced after each appointment by email, with the option of a bank transfer (no processing fee) or online payment (processing fee of 1.5% + \$0.25). A cancellation fee may be applied to missed appointments with less than 24 hours notice.

## Consent for Counselling

By your signature below, you indicate that you have read and understood this document, and that any questions about it were answered to your satisfaction. A copy of this completed form can be provided to you at your request.

I, ..... (Joanne Charles) verify the accuracy of this statement and

acknowledge my commitment to conform to its specifications.      Date .....

Counsellor's Printed Name .....

Signature ..... Date .....

Counsellor's Printed Name .....

Signature ..... Date .....

## Consent for Counselling for Minors

I ..... (Guardian's printed name) state that I have legal authority to obtain counselling for ..... (Minor's printed name) entrusted to my care.

Counsellor/Guardian Printed Name .....

Signature ..... Date .....

