

VALOR COUNSELING CENTER, PLLC

Benjamin Higgins, BS
Professional Counselor Intern
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PROFESSIONAL DISCLOSURE STATEMENT

Thank you for choosing Valor Counseling Center, PLLC and I, Ben Higgins, as your Professional Counselor Intern. I am honored to be able to assist you with your mental health goals. The purpose of this form is to provide detailed information regarding your counseling treatment. Please read this form entirely before signing and agreeing to all its contents.

CREDENTIALS

Master of Arts in Marriage and Family Therapy (MFT) @ Southeastern Baptist Theological Seminary (*projected to graduate 2024*)

Bachelor of Science in Criminal Justice @ California Baptist University 2021

ABOUT COUNSELING

Counseling is a decision an individual, couple or family makes because they want to better themselves or process a situation or relationship. As your counselor, I am committed to helping you achieve your personal goals and maintain a professional relationship with you. If at any point in the counseling process you are not satisfied for some reason with our sessions, please let me know so we can adjust goals and/or think about possible next steps or different approaches that may be beneficial. Your care and overall health are most important to me clinician.

ABOUT BEN

I, Ben Higgins, received a Bachelor of Science degree in Criminal Justice from California Baptist University in 2021. Currently, I am finishing my Master of Arts in Marriage and Family Therapy from Southeastern Baptist Theological Seminary and am projected to finish in the winter of 2024. I have years of experience working with males ages 16 and older in a mentorship capacity. I have also received opportunities to work alongside law enforcement officers and hope to pursue more psychological work with first responders in the future.

CONFIDENTIALITY

Confidentiality at Valor Counseling Center is guaranteed according to governed HIPPA laws. As a Professional Counseling Intern, I am required to regularly meet for confidential supervision sessions with my academic counseling supervisor and professor for guidance and training. During these sessions I will refrain from using any detailed information such as name, race, personal information and so forth to maintain safety. We may watch recorded video counseling sessions only if you, the client, agree and sign this specific form. Confidentiality can be broken if a client(s) admits to planning harm to themselves or someone else, in which case, I will take the necessary steps to keep this from happening.

For adults (18 years +), confidentiality means everything discussed in the counseling session will stay between myself, the provider, and the client(s) in a session or group. If I am counseling a 17-year-old and they turn 18, they must sign a release form for parents to have any involvement in sessions. The 18-year-old can decide which information to release.

In a couple's session, I, the therapist, will not keep information from the client's partner at any time or for any reason which includes emails and/or phone calls. All conversations are open, and I will always encourage honesty.

Finally, while telehealth sessions are conducted through a HIPPA compliant platform, due to limitations with online accessibility, there is always a chance of confidentiality being interrupted at some point due to technology slips. In North Carolina, confidentiality is explained further here: <https://www.ncblpc.org/LawsAndCodes>

EMERGENCIES

While I try to check my messages frequently during the day, I may be in session for several hours before I have an opportunity to view and respond to them. **For ALL emergencies, call 911 immediately.** For in-patient or out-patient care call Triangle Springs at 919.768.8900 or call 988 to speak with a trained crisis-response counselor.

LATE CANCELLATION / NO-SHOW POLICY

Late cancellations must be made 24 hours prior to the appointment time to avoid the late cancellation fee which is half of your normal session fee. A no-show (failure to cancel within 24 hours of the appointment time beginning or failure to show-up for the session completely) will result in a full session charge of your normal session fee. Late cancellations and no-show fees are never covered by insurance. After two no-show appointments or continued cancellations I will address possibly pausing therapy until the client feels ready to commit. Thank you for respecting this clinical boundary as this time is set aside specifically for you.

PAYMENTS

Full payment for your session is due at the time of service. We accept all major credit cards, flex or HSA cards, cash and personal check. Please refer to the payment form for more information on payment amounts and session times. This form must be signed before the first session. Returned checks will result in a \$30 fee. A credit card is required to be kept on file for late cancellation purposes or no shows.

As a Professional Counseling Intern, I am unable to take insurance due to state laws; therefore, at Valor Counseling Center we offer a sliding scale based on household income (see fees form). We understand financial hardships, so we hope to make counseling affordable for everyone. Please reach out to Valor Counseling Center’s Owner, Ashley Wright @ ashley.wright@valorcounselingcenter.com for any billing questions.

Printed Name Date

Signature Date