Professional Disclosure Statement

Lindsay Caldwell, MS, Resident in Counseling

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(540) 391-0251

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**My Qualifications**

I am a Resident in Counseling, earning my hours towards independent licensure at the private practice, Counseling Connect. My Resident license number is 0704015820. I graduated with a Master’s in Counseling and Human Development from Radford University. My undergraduate degree is in Psychology from Radford University. I work under the supervision of Virginia Board-Approved Supervisor, Rachel Burgess, LPC (License # 0701010180).

**Counseling Background and Approach**

I completed my internship at New River Valley Community Services. I have experience in outpatient counseling and intensive in-home services. I provide treatment for depression, anxiety, ADHD, and Bipolar Disorder and I specialize in helping clients with suicidal and self-harm issues. I’m an advocate for positive social change and identify myself as an ally of the LGBTQ+ community. I facilitate positive change by providing a warm, empathetic, and non-judgmental environment. My theoretical orientation is Person-Centered, an approach which emphasizes the agency of the client to direct their own care. You have the choice of setting your own goals and determining what you want to gain from services. I encourage my clients to explore their feelings, beliefs, and worldview, while teaching them how to cope with current and future problems. I believe that people change because they want to. Through trust and collaboration in the client-counselor relationship, it is possible for anyone to reach their full potential and become the person they want to be in the future.

**Session Fees and Length of Service**

The length of individual sessions is 50 minutes. The fee for self-pay services is $125 per clinical hour. The initial 60 minute assessment is $135. There is a standard $125 charge for no-shows and late cancellations (less than 24 hours’ notice). I accept clients with Medicaid insurance plans and offer a sliding scale to those who cannot afford market rates for therapy. Payment is made by debit or credit card.

**Use of Diagnosis**

Some health insurance companies will reimburse clients for counseling services and some will not. In addition, most will require that a diagnosis of a mental-health condition and indicate that you must have an “illness” before they will agree to reimburse you. Some conditions for which people seek counseling do not qualify for reimbursement. If a qualifying diagnosis is appropriate in your case, I will inform you of the diagnosis before we submit the diagnosis to the insurance company. Any diagnosis made will become part of your permanent insurance records.

**Confidentiality**

Confidentiality belongs to you (the client), meaning that all of your private information is yours and I am responsible for keeping it safe for you. All of our communication becomes part of the clinical record, which you may access upon request. I will protect your confidentiality and not share 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, (c) you share information about child or elder abuse, or (d) I am ordered by a court to disclose information.

**Complaints**

Although clients are encouraged to discuss any concerns with me, you may file a complaint against me with the organization below should you feel I am in violation of any of these codes of ethics. I abide by the ACA Code of Ethics (<http://www.counseling.org/Resources/aca-code-of-ethics.pdf>).

Virginia Department of Health Professions

9960 Mayland Drive, Suite 300  
Henrico, Virginia 23233

Phone: (804) 367-4610 (Main Line)  
Email: [coun@dhp.virginia.gov](mailto:coun@dhp.virginia.gov)

Fax: (804) 767-6225

**Acceptance of Terms**

We agree to these terms and will abide by these guidelines.