



Professional Disclosure Statement

Catherine Miree

Higher Heights Counseling Services, LLC
26677 W. Twelve Mile Rd Ste 111
Southfield, Michigan 48034

Welcome to **Higher Heights Counseling Services, LLC**. This document contains important information about my professional services and business policies. Although these documents are long and sometimes complex, it is very important that you understand them. When you sign this document, it will also represent an agreement between us. We can discuss any questions you have when you sign them or at any time in the future.

Qualifications

I received a ‘MA’ in Counseling from Ashland Theological Seminary. My ‘BS’ concentration was Community Development at Central Michigan University. In addition, I also obtained Certification as a Biblical Counselor from Christian Research & Development. I am a Licensed Professional Counselor; however, I am a Christian Counselor at heart. As such, I do believe that the application of faith-based principles produces definite results. Albeit my personal truth, I respect each person individual rights. As such, I am very much familiar with clinical methodologies, and will utilize various approaches such as Gestalt, Person-Centered, Cognitive Behavioral, Solution-Focused, and others as deemed appropriate to encourage the best outcome. My extensive training, professional and personal experience has provided me the knowledge, skills and sensitivity in working with individuals, couples, families, and groups.

Description of Practice

Counseling involves the sharing of personal problems, concerns, and stories with a professional who is skilled at helping the client(s) come to a resolution or solution about one or more particular situations. Counseling is a relatively short-term, interpersonal theory based professional activity; guided by ethical and legal standards that focuses on helping persons resolve developmental issues, situational problems, and more complex personal diagnosis.

The general goals for the client are that he or she can identify the issues, develop a plan of action, and then implement that plan. This is a very personal process; it is educational and developmental by nature.

My understanding of counseling comes from many different theoretical orientations. I believe that the client or clients have the solutions to their dilemmas within themselves. We have the freedom to choose what directions our life takes and the responsibility to take control of that freedom. Therefore the counselor does not have the “answers” to the client’s “problem” but is a facilitator of the process that helps the client take responsibility and action to come to a feasible resolution.

The first 2-3 sessions will involve a comprehensive evaluation of your needs. By the end of the evaluation, I will be able to offer you some initial impressions of what our work might include. At that point, we will discuss

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your treatment goals and create an initial treatment plan. You should evaluate this information and make your own assessment about whether you feel comfortable working with me. If you have questions about my procedures, we should discuss them whenever they arise. If your doubts persist, I will be happy to help you set up a meeting with another mental health professional for a second opinion.

Risks/Benefits of Counseling

Counseling is an intensely personal process which can bring unpleasant memories or emotions to the surface. There are no guarantees that counseling will work for you. Clients can sometimes make improvements only to go backwards after a time. Progress may happen slowly. Counseling requires a very active effort on your part. In order to be most successful, you will have to work on things we discuss outside of sessions.

However, there are many benefits to counseling. Counseling can help you develop coping skills, make behavioral changes, reduce symptoms of mental health disorders, improve the quality of your life, learn to manage anger, learn to live in the present and many other advantages.

Professional Fee Scale

A 30 min. Consultation is \$50.00. The Intake Assessment will be approximately 75mins. - 1.5hour, and is an additional \$25.00 to the normal per session rate. Each session thereafter will last between 45 - 60 minutes and will be billed at a rate of \$150.00 per visit for Individual, \$175.00 - per visit for Couples and Families up to '3' persons. Each additional family member is \$25.00 per person. Group therapy is billed at a rate of \$75.00 per participant with a 60 – 90 minute session. A sliding scale / reduced fee (based on income) is available for clients who qualify and can be discussed.

You are responsible for paying at the time of your session unless prior arrangements have been made. Payment must be made by check, cash, or credit card. Any checks returned to my office are subject to an additional fee of up to \$35.00 to cover the bank fee that I incur. If the debt goes unpaid, I reserve the right to use an attorney or collection agency to secure payment.

Appointments and Cancellation Policy

Appointments will ordinarily be 45-75 minutes in duration, once per week at a time we agree on, although some sessions may be more or less frequent as needed. The time scheduled for your appointment is assigned to you and you alone. If you need to cancel or reschedule a session, I ask that you provide me with 24 hours' notice. If you miss a session without canceling, or cancel with less than 24 hour notice, you may be required to pay a \$50.00 fee charged for the session unless we both agree that you were unable to attend due to circumstances beyond your control]. It is important to note that insurance companies do not provide reimbursement for cancelled sessions; thus, you will be responsible the cancelation fee. In addition, you are responsible for coming to your session on time; if you are late, your appointment will still need to end on time.

Insurance

Services may be covered in full or in part by your health insurance or employee benefit plan. Please check your coverage carefully.

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Confidentiality

Your counselor will make every effort to keep your personal information private. If you wish to have information released, you will be required to sign a consent form before such information will be released. There are some limitations to confidentiality to which you need to be aware. Your counselor may consult with other professional counselors in order to give you the best service. In the event that your counselor consults with another counselor, no identifying information such as your name would be released. Counselors are required by law to release information when the client poses a risk to themselves or others and in cases of abuse to children or the elderly. If your counselor receives a court order or subpoena, she may be required to release some information. In such a case, your counselor will consult with other professionals and limit the release to only what is necessary by law.

The following are legal exceptions to your right to confidentiality. I would inform you of any time when I think I will have to put these into effect.

1. If I have good reason to believe that you will harm another person, I must attempt to inform that person and warn them of your intentions. I must also contact the police and ask them to protect your intended victim.
2. If I have good reason to believe that you are abusing or neglecting a child or vulnerable adult, or if you give me information about someone else who is doing this, I must inform Child Protective Services within 48 hours and Adult Protective Services immediately.
3. If I believe that you are in imminent danger of harming yourself, I may legally break confidentiality and call the police or the county crisis team. I am not obligated to do this, and would explore all other options with you before I took this step. If at that point you were unwilling to take steps to guarantee your safety, I would call the crisis team.

If you and your partner decide to have some individual sessions as part of the couple's therapy, what you say in those individual sessions will be considered to be a part of the couples therapy, and can and probably will be discussed in our joint sessions. Do not tell me anything you wish kept secret from your partner. I will remind you of this policy before beginning such individual sessions

Other Rights

If you are unhappy with what is happening in therapy, I hope you will talk with me so that I can respond to your concerns. Such comments will be taken seriously and handled with care and respect. You may also request that I refer you to another therapist and are free to end therapy at any time. You have the right to considerate, safe and respectful care, without discrimination as to race, ethnicity, color, gender, sexual orientation, age, religion, national origin, or source of payment. You have the right to ask questions about any aspects of therapy and about my specific training and experience. You have the right to expect that I will not pursue or have social or physical relationships with clients or with former clients.

Record Keeping

Your counselor may keep records of your counseling sessions and a treatment plan which includes goals for your counseling.

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These records are kept to ensure a direction to your sessions and continuity in service. They will not be shared except with respect to the limits to confidentiality discussed in the Confidentiality section. Should the client wish to have their records released, they are required to sign a release of information which specifies what information is to be released and to whom. Records will be kept for at least 7 years but may be kept for longer. Records will be kept either electronically on a USB flash drive or in a paper file and stored in a locked cabinet in the counselor's office.

Code of Conduct

As a Professional Counselor in the State of Michigan, I am subject to the ACA & AACC Code of Ethics and Michigan State Counselor Laws. If at any time, you feel my behavior or my counseling approach is inappropriate or troubling to you, please let me know. If, however, you do not feel your concerns are being addressed appropriately, feel free to contact the following:

Michigan Department of Licensing and Regulatory Affairs
Bureau of Professional Licensing
Legal Affairs Division, Allegations Section
P.O. Box 30670
Lansing, MI 48909
(517) 373-9196

Contacting Me

If at any time you have any questions or concerns, please feel free to contact me via correspondence at, 26677 West Twelve Mile Rd Ste 111, Southfield, MI 48034; or via phone at, (248) 802-9750. Please keep in mind that I am often not immediately available by telephone. I do not answer my phone when I am with clients or otherwise unavailable. At these times, you may leave a message on my confidential voice mail and your call will be returned as soon as possible, but it may take a day or two for non-urgent matters. If you feel you cannot wait for a return call or it is an emergency situation, go to your local hospital or call 911.

Emergencies:

Emergencies arise in all people's lives. You are welcome to call me on (248) 802-9750 if you need an emergency appointment. In case of a dire emergency (suicide attempts, anxiety attacks, etc.) please call your local hospital or 911.

Client responsibilities:

You are expected to keep your appointments and notify me in case you wish to terminate the counseling relationship. Please notify me if you are seeing another mental health professional.

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SIGNATURES:

I have read and understand the Declaration of Practices and Procedures.

Client: _____

Date: _____

Client: _____

Date: _____

Therapist: _____

Date: _____

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