



# Professional Disclosure Statement

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I am looking forward to getting started and learning more about you. But first, it's important that you learn some about the counseling process. This document is designed to inform you about my background and to ensure that you understand our professional therapeutic relationship, your rights as a client, and RFC office policies and procedures.

## Background & Qualifications

I hold a M.A. in Expressive Therapy with a specialization in Mental Health Counseling from Lesley University (2010). I began practicing as a Licensed Professional Counselor (#8596) in May 2011 and have primarily served adolescents and adults facing anxiety, behavioral problems, mood disorders, self-harming behavior and familial or relationship concerns.

## Counseling Approaches

I work primarily from a Cognitive Behavioral perspective, which focuses on the connection between our thoughts, feelings and actions. At times I utilize Solution Focused Therapy, Person-Centered Therapy and the arts (creative writing, visual art) in the counseling process. I may use different assessment scales, specifically regarding depression, anxiety and self-harm to assist in the diagnosis and treatment planning process.

It is important to me that you feel comfortable offering input during your counseling experience here. Not only can this give you a sense of empowerment, but it also helps me to offer you the best services that I can. At times, a collaborative approach may be helpful in your recovery process and a referral to other community specialists, such as a psychiatrist or nutritionist, may be beneficial.

Counseling will include your active involvement, commitment and efforts to change. This may require work outside of session through the use of homework assignments that I believe may further benefit you. You may also experience levels of emotional discomfort that you are not used to, at which point I would encourage you to discuss this with me in session for further processing and support.

## Session Fees & Length, and Insurance

Payment for services can be found under "RFC Fee Schedule Information" in your patient portal and will be discussed prior to your initial session. RFC accepts cash, credit or debit cards, HSA and FSA debit cards, and checks. Most clients prefer to pay for services online via their secure client portal. Out-of-pocket fees are set by RFC.

RFC is currently in-network with BCBSNC (not including Blue Value), Aetna, Medcost, and CBHA. If RFC is out-of-network for your plan, your insurance may still cover some service costs. If you intend to use insurance to cover a portion of session costs, I will file a claim with your insurance company for services provided. In most cases, this requires that I make a diagnosis. Most insurance plans require a diagnosis before providing coverage for services. Any diagnosis will become a part of your permanent health record. You have a right to this information and can discuss it with me at any time. Typically, a first session for a new client lasts 60 minutes. Standard individual and family sessions are 50-60 minutes long. Sessions may have additional time added to them in advance (up to a total of 120 minutes).

Any outside services I provide, such as testifying in court, may have fees applied to them. I do not provide the following services: DWI assessments or custody evaluations. I reserve the right to deny the provision of additional adjunct services based on clinical and professional discretion.

## Client Records and Confidentiality

In order to ensure your privacy, I follow Federal Confidentiality requirements as outlined by HIPAA. The law protects information you choose to share about yourself, and only under certain legal obligations or at your written

consent will I disclose this privileged information. All of our communication, including diagnosis and treatment planning, becomes a part of your permanent clinical record. After our first session, your RFC client record will be created.

The circumstances in which I may be required by law to break confidentiality include: (1) if you disclose that you intend to harm yourself or someone else; (2) if I determine that you are a danger to yourself or someone else; (3) if information is revealed about alleged child or elderly abuse or neglect; (4) if a court of law orders your records from me. Otherwise, as your counselor and abiding by the ethical code, I will not break confidentiality.

## Outside Relationships & Electronic Communication

Ethical and legal codes restrict me from engaging in any form of relationship with clients other than professional. Thus, contact will be limited to counseling sessions only. This also means that I cannot accept any friend or follow requests on social media. Please note that while I understand giving gifts are often a form of appreciation, I am unable to receive gifts from clients. If we happen to see each other outside of counseling, I will not acknowledge or approach you. These parameters protect your personal rights and privacy.

The use of electronic communication, such as email, may be needed or preferred in some instances. Although these forms of communication are very efficient, I cannot ensure that all electronic communications are entirely secure, and am not liable for potential breaches of privacy that may result from your use of any digital or electronic correspondence. The RFC Practice Policies outline RFC practices regarding electronic communication in more detail.

I do not provide after hours or emergency contact support through RFC. RFC provides clients with a list of emergency resources in the client portal, upon request, and on the SCC website at the bottom of the "New Client Info & Forms" page. I recommend that you become familiar with these resources in the event of a situation where urgent assistance is needed.

## Closure of Services & Complaint Procedure

Should I feel that you may be more effectively served by resources beyond the scope of those which I provide, I will discuss this with you and refer you to another professional. Should you decide to end counseling at any point, I will respect your decision and assist in providing an appropriate referral where possible.

In the event that any part of our work together creates a cause for concern or complaint, please inform me immediately. I try to address any concern that clients voice as quickly and effectively as I possibly can. If you believe that I am in violation of the current ACA code of ethics at any point (<http://www.counseling.org/Resources/aca-code-of-ethics.pdf>), you may:

### Contact RFC to discuss your concerns:

Redfish Counseling  
1022 W 1st St, Ste 203, Winston-Salem, NC 27101  
Email: [office@redfishcounseling.com](mailto:office@redfishcounseling.com) Phone: 336-914-3038

- OR -

### File a complaint with the organization below:

North Carolina Board of Licensed Clinical Mental Health  
Counselors  
P.O. Box 77819, Greensboro, NC, 27417  
Phone: 844-622-3572 or 336-217-6007 Fax: 336-217-9450  
E-mail: [Complaints@ncblpc.org](mailto:Complaints@ncblpc.org)

**Acceptance of Terms**

I, \_\_\_\_\_ agree to the terms of this Disclosure Statement and to abide by these guidelines. (print name)

Client Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if client under 18) \_\_\_\_\_ Date \_\_\_\_\_