

## **Professional Disclosure Statement**

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### **Counseling Background and Qualifications**

I have an extensive background that includes over twenty years of therapeutic and educational work in a variety of settings with children and families from diverse backgrounds and life situations. For the past five years, I have provided counseling services for children, individuals and families. Services include play therapy for children, approximate ages of 3-12, as well as support for parents and guardians that are specific to issues of parenting, partnership, and/or family dynamics. Treatment specialization includes play therapy, parenting support, and therapy for trauma related issues, anxiety and depression, attachment concerns, school adjustment issues as well as a wide range of emotional and behavioral issues.

I hold a conviction for an individual's innate potential for growth and healing. I incorporate integrative therapy approaches that utilize current research on attachment theory, emotional and nervous system regulation, and advances in neuroscience and brain development. My work is heavily guided by the Synergetic Play Therapy Model which incorporates a child-centered, primarily non-directive and experiential approach to play therapy. Play therapy is a process that focuses on children's need to express themselves through their primary language of play. In a safe environment with a trained therapist, children can express themselves and process through a variety of emotional concerns. Another strong emphasis in my work with children and their parents is through utilizing nature-based therapeutic principles. I have a fundamental belief that our emotional, mental, physical, and spiritual health is directly interconnected with spending time in the natural world. Through nature-based play therapy, children can increase their awareness, deepen their emotional intelligence, nervous system regulation, communication skills, mindfulness skills and attachment to self and others.

### **Education**

- Master of Arts in Transpersonal Counseling Psychology; May 2012  
Naropa University, Boulder, CO
- Master of Science in Human Development and Family Studies; May 1993  
University of Arkansas, Fayetteville, AR
- Bachelor of Science in Human Environmental Science, Child Development Emphasis; May 1990

### **Professional Licenses, Certifications, Registrations, and Trainings**

- Licensed Professional Counselor (LPC): #11425 received March 2015 through the NC Board of Licensed Professional Counselors.
- Advanced Synergetic Play Therapist Certification received August 2012 upon completion of a two year advanced play therapy training at the Colorado Institute for Play Therapy in Boulder Colorado.
- Registered Play Therapist: Registration #T2728. Received May 2015 from the Association For Play Therapy upon completing required 150 specialized training hours.

## **Session Fees and Length of Service**

The fee for out-patient psychotherapy services are \$125 for the initial intake and \$110 per 55minute session if paying by check, cash, or credit card. Under some circumstances reduced fees are accepted and will be determined and agreed upon on an individual basis. Auxiliary services are prorated per 60 minutes. Auxiliary services refer to case summaries, school/teacher consultations, coordination of services with other authorized individuals, phone calls lasting longer than 15 minutes, and any other services requested by the client. The client is responsible for completing, filing and collecting third-party (e.g. insurance) reimbursement. I will provide a Professional Service Statement that can be attached to your the insurance form.

## **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 health insurance company. Any diagnosis made will become part of your permanent insurance records.

## **Confidentiality**

All of our communication becomes part of the clinical record, which is accessible to you upon request. I will keep confidential anything you say as part of our counseling relationship, however, there are some exceptions to this confidentiality. If a legal exception arises during therapy, if feasible, you will be informed accordingly.

The following exceptions apply:

1. If you direct me in writing to disclose information to someone else
2. Mental health professionals are required by law to report to the proper authorities when: It is determined you are a danger to yourself or others (including child or elder abuse), or I am ordered by a court to disclose information.
3. When you or your representative files a lawsuit or grievance against your counselor.

## **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>).

North Carolina Board of Licensed Professional 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

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

Client: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor: \_\_\_\_\_ Date: \_\_\_\_\_