

PROFESSIONAL DISCLOSURE STATEMENT

Amy L. Gould, LPCC-S, NCC, CCMHC

Amy L. Gould, LPCC-S, NCC, CCMHC — Licensed Professional Clinical Counselor with Training Supervision Designation

Training Supervision Designation: E.0602179-SUPV (Ohio)

Providing services through **All Heart Counseling** and **Deep Heart's Core**

3659 S. Green Rd., Suite #101, Beachwood, OH 44122

All Heart Counseling: 216-606-8533 • allheartcounseling.com

Deep Heart's Core: 216-499-5192 • deepheartscore.com

LICENSURE

I am licensed as a professional clinical counselor in the State of Ohio and also hold licensure in Georgia, Indiana, and Florida. I provide services only while a client is physically located in a state where I hold an active license. You have the right to verify my licensure and to access consumer protection resources through the licensing boards listed at the end of this statement.

EDUCATION AND CREDENTIALS

- **M.A., Community Counseling** — John Carroll University
- **LPCC-S** — Licensed Professional Clinical Counselor with Training Supervision Designation (Ohio)
- **NCC** — National Certified Counselor (National Board for Certified Counselors)
- **CCMHC** — Certified Clinical Mental Health Counselor (National Board for Certified Counselors)
- **ASCH Approved Consultant** — American Society of Clinical Hypnosis (advanced certification in clinical hypnosis)

AREAS OF COMPETENCE

• Counseling for War Veterans • Trauma & Rape Crisis Intervention • Adult Survivors of Childhood Abuse • Group Counseling • Couples & Relationship Counseling • Family Counseling • Personal and Social Counseling • Diagnosis & Treatment of Mental and Emotional Disorders	• Clinical Hypnosis • Severe Mental Illness & Disability • License Supervision • Spiritual Counseling • Grief Counseling • Telemental Health Counseling • Developmental Disabilities • Relapse Prevention & Addictions Counseling • Risk Assessment & Safety Planning
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NATURE OF SERVICES AND CLIENT RIGHTS

Counseling is a collaborative process. You have the right to be informed about the methods and goals of your care, to ask questions at any time, to participate in decisions about your treatment, and to withdraw consent for treatment at any time. The reasonably foreseeable risks and benefits of counseling, and any alternatives, will be discussed with you. Detailed information about confidentiality, its legal limits, records, telehealth, and related matters is provided in my Client-Counselor Service Agreement, my Notice of Privacy Practices, and my Informed Consent for Electronic Service Delivery.

Sexual intimacy between a counselor and a client is never appropriate and is prohibited. If you ever feel that our relationship is not professional or that your rights are not being respected, please tell me, and you may also contact the appropriate licensing board listed below.

PROFESSIONAL FEES

My fees, including fees for counseling and for other professional services, are provided separately and are available upon request. Specific fees and payment terms are described in the Client-Counselor Service Agreement, the Good Faith Estimate, and any agreement for a specific professional service. Cancellation and administrative fees may apply as described in those documents.

IF YOU HAVE A CONCERN OR COMPLAINT

If you have a concern about the professional services you have received, I hope you will speak with me directly so we

can address it. You also have the right to contact the licensing board that governs my practice in your state:

Ohio — Counselor, Social Worker, and Marriage & Family Therapist Board

77 South High Street, 24th Floor, Room 2468, Columbus, OH 43215-6171 • (614) 466-0912 • cswmft.ohio.gov • elicense.ohio.gov

Georgia — Composite Board of Professional Counselors, Social Workers, and Marriage & Family Therapists

237 Coliseum Drive, Macon, GA 31217-3858 • (478) 207-2440 • sos.ga.gov

Indiana — Behavioral Health and Human Services Licensing Board

402 W. Washington Street, Room W072, Indianapolis, IN 46204 • (317) 234-2054 • in.gov/pla

Florida — Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling

4052 Bald Cypress Way, Bin C-08, Tallahassee, FL 32399-3258 • (850) 245-4474 • floridasmentalhealthprofessions.gov

Certification — National Board for Certified Counselors (NCC, CCMHC): nbcc.org • American Society of Clinical Hypnosis: asch.net

This Professional Disclosure Statement is posted in the office, available upon request, and published on my websites. It is provided for your informatino; no signature is required.
