

FIRST BAPTIST CHURCH COUNSELING POLICY AND PROCEDURE MANUAL



FIRST COUNSELING
BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

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Policies and Procedures Introduction

The First Baptist Church of Jacksonville, Florida, Inc. (First Baptist) is committed to the Word of God and to shepherding people who struggle with personal problems. Therefore, we are committed to biblical counseling. First Counseling, the Counseling Ministry of First Baptist Church, exists to equip and come alongside the existing ministries of First Baptist in matters of formal, more intensive counseling. We want to help struggling people know how to implement biblical solutions for life's problems.

Because we exist to worship the true and living God (Romans 11:33-36), our main goal for all First Baptist discipleship and counseling is to glorify God (1 Corinthians 10:31). We seek to do this through loving and helping one another grow in Christ-likeness (Ephesians 4:15). This means all First Baptist counselors are committed to giving biblical guidance for every problem a person may have (2 Peter 1:3-4). All First Baptist disciplers and counselors strive for a standard of excellence by giving God our best and caring for one another with the Bible (Hebrews 4:12; Colossians 3:23; Galatians 6:1-3). First Counseling counselors, the entire ministry staff, and all lay counselors work in unity in the body of Christ to accomplish the equipping of the saints (Ephesians 4:1-16), the faithful shepherding of the flock (1 Peter 5:1-5) and fulfilling the Great Commission (Matthew 28:18-20).

To make disciples of all nations is to make worshipers from all nations (Psalm 67:1-3; 1 Thessalonians 1:9; Revelation 5:9-10). This means the gospel message is central to all First Baptist counseling because the gospel is God's means of restoring fallen humans to relationship with Himself (1 Thessalonians 1:9; John 14:6), thereby creating worshipers (God glorifiers [1 Peter 2:9]), instead of those who worship the loves of the world (Romans 1:25; 1 John 2:15-17).

Our wonderful Savior who died as our mediator between God and mankind so that we can now change (Ephesians 4:20-32; Philippians 1:6) cares deeply about personal problems (Isaiah 61:1). Therefore, all First Baptist counselors should be Christ-like and also care deeply about those struggling with personal problems (Romans 12:15).

The following gives clarity and uniformity to our discipleship and counseling approach for both counselor and counselee. It also helps us strive for excellence as worshipers of the Lord as we live in days that require much astuteness (Colossians 3:23; Philippians 2:15-16; 2 Timothy 3:16-17). Please sign the attachment that you have carefully read and will agree to abide by these Policies and Procedures.

1. Qualifications for Formal Counseling

Level 3 (Corrective) or 4 (Intensive) counseling at First Baptist occurs at or is arranged through First Counseling (see Appendices L and M). Counselors must be ACBC certified, be First Counseling approved and meet the qualifications required (2 Timothy 2:15; Ezra 7:10) to instruct others (Romans 15:14; Colossians 3:16-17; 2 Timothy 2:24-26). Formal counseling requires completed forms (*Personal Data Inventory* and *Informed Consent Agreement*; see #5) from counselees.

Counseling is defined as corrective or intensive discipleship that helps fulfill the Great Commission. Formal counseling takes the counselee out of the normal discipleship stream while life issues that are hindering the counselee from functioning properly are dealt with.

Discipleship is defined as intentional or directive relationships designed to help the believer grow in Christ-likeness as a worshiper and to equip him for ministry (Ephesians 4:12; 2 Timothy 2:2). Informal discipleship conversations (Levels 1 or 2 issues) may transition into formal counseling. These more specific issues may require help from a trained biblical counselor. To determine whether issues are discipleship issues or counseling issues an "SOS" should be completed (see Appendix L, Rubric for Determining Level Care).

2. Standards for Counselors, Pastors, and Ministry Staff

First Counseling counselors understand the importance of doing all things excellently for the glory of God (Colossians 1:10; 3:17, 23-24); they understand the necessity of living a life above reproach; and they understand the need to have an organized counseling system that includes but is not limited to having loving relationships, the ability to understand human problems and interpret these problems biblically, and the evaluation of counseling skills and assigning helpful homework (Proverbs 18:13; 1 Corinthians 14:40). The requirements for the Counseling Ministry approval are as follows:

First Counseling Counselor Requirements

1. Be ACBC certified.
2. Agree to abide by the ACBC Standards of Conduct (please see <https://biblicalcounseling.com/certification/standards-of-conduct/>).
3. Receive a personal recommendation from a First Baptist staff member.
4. Complete 10 sessions of observed counseling with a First Counseling-approved counselor.
5. Complete the yearly Advanced Track training.

Ongoing Requirements for the First Counseling Counselors

1. Maintain ACBC certification.
2. Pursue specializations through ACBC.
3. Complete 10 hours of CE each year.
4. Attend periodic progress meetings with the Pastor of Counseling or staff member approved by the Pastor of Counseling.
5. Complete *End of Counseling* Forms (per each case).
6. Attend and complete any assigned homework from continuing education meetings as set by the First Counseling staff counselor.
7. Read at least one book per year from the Counseling Ministry reading list (please see <https://biblicalcounseling.com/approved-reading-list/>) or as approved by the First Counseling staff counselor. Reading may count as CEU.

3. Counseling Confidentiality and Files

Proverbs 11:13 says, "Whoever goes about slandering reveals secrets, but he who is trustworthy in spirit keeps a thing covered." First Baptist counselors are to be trustworthy with private matters and are responsible with the counseling files and personal information of the counselee. Confidentiality means not sharing personal information of the counselee unless biblically necessary to do so (Proverbs 11:14; 15:22; 24:6). Information is shared with others only on a "need to know basis." Biblical counseling at the First Counseling Ministry is done under the authority and responsibility of First Baptist pastors (please see Policy #8 below), therefore the counselee's pastor or ministry leader may "need to know" information. The First Counseling counselors commit to keeping files in a secure place, to treating the information

as if it were their own personal details, and to returning Counseling Ministry files to the administrator promptly upon the conclusion of counseling (Matthew 7:12). Files of counseling cases that are not Counseling Ministry counselees must be kept securely in the various areas of ministry.

4. Informed Consent Agreement (for formal counseling)

The *Informed Consent Agreement* is a signed document between the counselor, First Baptist, and the counselee. It is a commitment between the counselor and counselee concerning the biblical basis of our beliefs, including biblical confidentiality, church discipline, the credentials of the counselor (i.e., no counselor acting on behalf of First Baptist does so as a licensed healthcare provider), and the counselee's participation in the counseling process. This provides protection and accountability for all parties. The signed *Informed Consent Agreement* is required in the application for formal counseling at First Baptist. It is crucial for all disciplers, decision counselors, jail visitation teams, Sunday School teachers, ministry staff, and the First Counseling staff to understand when to get informed consent. An *Informed Consent Agreement* is not necessary for the occasional conversation where an individual is seeking advice about spiritual or practical issues from the above-named ministry leaders. These types of conversation are considered "informal counseling" and are part of the one-another ministry of the church where members within the congregation care for and minister to each other on a regular basis. A signed *Informed Consent Agreement* is necessary after an individual has met with one of the same above-named ministry leaders for three consecutive times discussing the same issue(s) of struggle in those three meetings. This type of relationship has moved into "formal counseling," where the ministry leader has become the "counselor" and the individual seeking advice/counsel is the "counselee." If at any time the ministry leader does not want to function in the role of counselor, he or she is to direct the individual seeking advice/counsel to the First Counseling Ministry whereby they may receive formal counseling for their struggles. See Appendix C for a sample Informed Consent Agreement. See Appendix L and M to determine the level of care needed for the counselee.

5. Counseling Observers and Advocates at First Counseling

First Counseling exists primarily to serve the members of First Baptist and secondarily the community of Jacksonville. In addition, our goal is to equip the church to do the work of the ministry (Ephesians 4:12-16). For this reason, many of our counselors will have observers who are being trained in biblical counseling. This is a benefit to the counselee, a benefit to the observers as they learn, and a benefit to the counselor in caring for the counselee (Proverbs 15:22). Please see the First Counseling *Observer Form* (Appendix A) for more details.

From time to time it may be determined that an advocate is needed for a counselee. This is true if the counselee is a minor because it is our policy that two adults should be present in keeping with our "Protect My Ministry" procedures. In addition, it may be determined that an advocate is needed for the benefit of a counselee who is a First Baptist attender. This advocate can serve as an encourager and provide accountability in certain cases (Galatians 6:1-3). This can also serve to help others receive training in Biblical Counseling. Please see Appendix B for more details.

Because the Bible tells us to be dedicated to a local church body (Hebrews 10:25), if the counselees are not attenders of First Baptist, they will be asked to provide an advocate from their church. An advocate provides for the counselee's ongoing care and discipleship in

support of the formal counseling. This helps to foster relationships within their specific community of which they are in covenant membership. In addition, this helps train others in how to do biblical counseling. Advocates are to help bear one another's burdens in providing accountability for the counselees (Galatians 6:2). Please see the *First Counseling Advocate Form* (Appendix B) for more details.

6. Non-Member/Non-Attender Counseling Requests

The local church is the primary means for all ministry of the Word, including counseling and discipleship as a form of shepherding (Matthew 16:18-20, 18:15-20; Romans 15:14; 1 Peter 2:1-12; Revelation 19:6-10). This reality is why First Counseling requires counselees who are not members or attenders of First Baptist to be accompanied by an advocate (their pastor or church-appointed advocate) if they profess to be followers of Christ, as explained above (5. Counseling Observers and Advocates at First Counseling). Please see the *First Counseling Pastor/Church Recommendation Form* and the *First Counseling Advocate Form* (Appendix B).

If the counselees are not members or attenders of another church, they will be asked to commit to attending First Baptist while receiving counseling. This commitment would be at least one service each week.

7. Member/Attender Counseling Requests

Members' and attenders' first step in requesting counseling is to complete their PDI and *Informed Consent Agreement* forms. When there is a wait list, they are given priority over those who are members of other churches.

8. First Counseling, Co-Shepherding and Other First Baptist Ministry Staff

Because of our desire to shepherd the flock in unity as a team and to provide the best pastoral care possible, when a First Baptist attender becomes a counselee at First Counseling, we will inform his or her ministry staff member (Ephesians 4:1-3; 1 Peter 5:1-4).

The pastor is an overseer and shepherd of the local church (Titus 1:7). Therefore, it is the desire of the First Counseling counselors to communicate thoroughly and work supportively with all First Baptist pastors. The *First Counseling Informed Consent Agreement* permits communication between the First Counseling counselor, the First Baptist pastor and the counselee's direct ministry leader. Please see the *First Counseling Informed Consent Agreement* (Appendix C) and *Advocate* (Appendix B) for more information.

Even though we counsel as a team, if a situation arises where a counselee needs to be transferred to another counselor, the Director of First Counseling is to be notified and give approval of the transfer.

9. Counseling the Opposite Gender

First Baptist seeks to provide same-gender counseling as a goal. No male counselor or First Baptist male staff member is allowed to counsel alone with a female (Titus 1:6-8). When a male counselor is assigned a female counselee, it is mandatory for a female observer or advocate to be present at every session. Likewise, female counselors are not to counsel men as we desire for men to teach and demonstrate godly leadership to other men (1 Timothy 2:12). When there are emergency crises where a female counselor must give counsel to a male counselee, the female counselor must only do so with the permission of the Pastor of Counseling, the Senior Pastor or Associate Pastor (1 Timothy 3:1).

10. Counseling Minors

First Baptist loves families, honors parental authority and believes parents are to be the chief disciplers of their children (Ephesians 6:1-4; Proverbs 1:8). Therefore, parents or legal guardians are required to be involved in the counseling process with any children under the age of 18. Parents may be asked to participate in a variety of ways including attending sessions, doing homework, and providing accountability for their child. A required parental "consent to counsel" signature is included in the Informed Consent Agreement form for parents to sign. Our "Protect My Ministry" policy does not permit minors to receive one-on-one counseling. At least two individuals other than the minor receiving counseling must be present in the room at all times. The counseling we provide minors is part of the practice of our religion and is guided by the principles of our sincerely and biblically held religious beliefs (including our biblical understanding of sexuality).

11. Counseling Resources

First Counseling exists to serve the entire body of First Baptist. Therefore, First Counseling provides biblical resources for care and counseling. Our counseling staff is available to suggest helpful resources for particular areas and to provide wisdom as counselors grow in their understanding of counseling problems (2 Timothy 4:3-4). Because we desire to be teaching according to God's Word and because of the abundance of differing counseling theories, it is required for the staff of First Counseling and First Baptist to use the resources provided and affirmed by the First Counseling staff counselors or the senior leadership of the church. These resources are typically available through First Counseling at cost. Counselees are responsible for this purchase unless they are financially unable to do so. Please see the suggested resource list on the First Counseling Ministry page that is divided by topics.

12. Referrals

First Baptist recognizes the importance of professional medical care for medical problems, which is why the Counseling Ministry and all First Baptist counselors refer all counselees to medical professionals for medical problems. First Baptist and the Counseling Ministry do not refer to psychologists or psychiatrists unless the psychologist or psychiatrist is committed to biblical counseling. Because First Baptist counselors believe in the sufficiency of the Word of God (2 Timothy 3:16-17; 2 Peter 1:3) and endeavor to always rightly handle the Bible (2 Timothy 2:15; Proverbs 27:17), they may seek additional counsel from those "older in the faith," or even refer their counselees to other biblical counselors when needed (Colossians 3:15-17; 2 Peter 1:3; Proverbs 27:17; 11:14; 15:22; 1:5; 9:9; 2 Timothy 3:16-17). First Counseling works as a team and advises on all counseling situations within the church. When the First Counseling or First Baptist counselor is not equipped to help with a particular problem, the counselor will seek to sharpen his counseling abilities or will refer the counselee to another biblical counselor who has more expertise with this type of case.

13. First Baptist and Psychotropic Medicine and Medical Issues

While we hold to the sufficiency of Scripture for counseling problems, we know that many who will come to us will have been prescribed medications by a physician. The biblical teaching on the importance of the body affirms the use of medication for physical problems. As biblical counselors, we do not offer medical advice including advice on withdrawing from medications. Our care for counselees may lead us to ask questions about the side-effects of medication, or whether the counselees have allowed the medication to take the place of the Lord as a refuge in their life. We will always encourage counselees with questions regarding medications, or

who wish to discontinue using medications, to seek the advice of competent medical professionals before changing or discontinuing any medication.

14. Church Discipline

First Baptist and First Counseling desire to preserve the honor of God's name (1 Corinthians 5:1-5), to keep the unity of the church (Ephesians 4:1-3), and to restore fallen brothers and sisters (Matthew 5:23-24; 18:15-17; Galatians 6:1-2). Because we live in a fallen world with other fallen people, counselees may resist biblical change and refuse to repent. All First Baptist counselors lovingly pursue these individuals in the spirit of meekness with the goal of restoration (Galatians 6:1-3). Matthew 18:15-20 requires offended people first to deal individually with those in sin. If the offenders prove to be unresponsive to correction, one or two other Christians will address the matter in love, asking the unrepentant offenders to turn from their sin to Christ and righteousness. If the offender is still unrepentant, the situation should be documented (1 Corinthians 14:40) and referred to the Associate Pastor, who will consult with the Senior Pastor, who will create a plan to follow the guidelines of Matthew 18 in the particular context.

These pastors determine whether or not mediation is needed or the involvement of the Member Care and Restoration Committee. The goal for an unrepentant counselee is always restoration. If the counselee being pursued is a female, then a female counselor should be involved in the process.

15. Domestic Violence and Marriage Separation

First Baptist and First Counseling have compassion on those who live in abusive conditions. Because the gospel is described with words like grace, mercy, and sacrificial love, domestic violence attacks the very essence of a Christian home. In addition, vows like "to love and to cherish, to have and to hold" were promised at marriage; therefore, abuse is a violation of those vows.

We believe though that God designed marriage to be a covenant relationship that reflects the loving relationship of Christ and His Church (Malachi 2:14; Ephesians 5:22-33). A marriage covenant can be defined as a sealed commitment to live in allegiance to one another for a lifetime.

It is our deep desire therefore to fight for marriages and to urge couples to keep their marriage covenants, even if there has been grievous sin. But, temporary separation for safety could be advised for physical violence (Acts 8:1; 11:19). While safety is of utmost importance, even the most difficult marriage situations can be redeemed with the help of God's Word, His Spirit and the support of a loving church family (Psalm 19:7-11; Ephesians 1:19; 3:20-21). Abusive people can repent by putting off the old man, being renewed in the spirit of their minds and by putting on a new man.

Reporting abuse: It is crucial that consent to report be obtained from the abused party before reporting since it is considered unethical to report abuse in the State of Florida without the consent of the abused. If there is imminent danger (see #16), 911 should be called even without informed consent. Keeping the above in mind, we lean toward reporting and urging abused parties to report.

While we believe that we can be sinned against grievously by the way others speak to us, we must be careful to gather much information when a counselee says he or she is being “verbally” or “emotionally” abused. These must be handled on a case-by-case basis and require wisdom. The pastor over that area of ministry and possibly the Pastor of Counseling should be consulted before counseling separation.

If there is uncertainty about how to proceed with any report of abuse, please convene a “counsel of three,” two of which must be ministry staff members to consult with one another and make a decision. This typically could be the pastor over that area of ministry, the Pastor of Counseling and one other ministry staff member or lay counselor.

Domestic abuse against a “vulnerable adult” (anyone 18 years of age or older who is incapable of caring for him or herself or in a weakened condition) is a mandatory reporting issue (See Florida statues in Appendix G.) Clear physical abuse must be reported to the Pastor of Counseling and Discipleship or the pastor over that area of ministry to help determine the best course of action within the church. Our utmost desire is to glorify God by protecting the vulnerable members of the flock.

16. Reporting Child Abuse

First Baptist and First Counseling report all accusations of child abuse that meet the standard of “reasonable cause” to legal authorities. The LORD instructs Christians to protect the innocent (Psalm 82:3-4; Proverbs 24:11) and shepherds to protect the flock (Acts 20:28-29). We also are instructed to follow government guidelines that do not violate biblical truth (Romans 13:1-3). If a counselor or children’s worker has reason to believe that a child is being abused, the procedures are as follows:

1. The counselor or children’s worker should immediately report the accusation to the pastor over the area of ministry.
 - a. Info to include in the report:
 - i. Clear statement suspicion (physical, sexual, neglect, etc.)
 - ii. Child’s name (correct spelling), age, race, sex, date of birth;
 - iii. Names of siblings in the home;
 - iv. Parents/caregivers’ names, addresses, contact info;
 - b. Description of specific concern (apparent injuries, marks, bruises, threats)
2. The informed pastor should immediately report the accusation to the Pastor of Counseling and Discipleship.
3. An immediate course of action must be determined. This course of action may include having the counselee report the abuse which is required by law if the counselee is an adult living in the home where the alleged abuse is taking place, or having the counselor, children’s worker, or ministry staff member report the abuse, working with the Department of Child and Families (DCF). Please be advised that we are not required by law to cooperate with DCF during investigations unless a subpoena is served, and even in that case clergy-client privilege may possibly be used as a means not to give testimony. In particular, we have no desire to be involved in custody battles between parents unless it is abundantly clear that it is in the best interest of a child to be with one parent over the other.
 - a. It is important that the person having the most first-hand knowledge of the situation makes the report of child abuse or neglect.

4. Suspected abuse needs to be reported to the Abuse Hotline (800-96-ABUSE) immediately.

See Appendix H for Florida Statutes related to the duty to report and how to contact the government authority.

17. Suicide Threat or Threat of Harm to Others

God created human beings in His image as the pinnacle of all creation (Genesis 1:26-28). Therefore, life is sacred. God also ordained the number of our days; therefore, He is in control and we are to submit to His purposes in our lives rather than take these matters into our own hands (Job 14:5; Psalm 139:16). Further, we are called to compassionately care for those dealing with the stresses of life (Galatians 6:1-3). Therefore, all who provide shepherding care at First Baptist will take great care in assessing a suicide threat and report all serious threats to 911 (Romans 12:15; Galatians 6:1-3; 1 Thessalonians 5:14). We will also prioritize giving hope to those who no longer desire life (Proverbs 13:11; Matthew 7:12). If a counselor or staff member hears a suicide threat, the following procedures should take place:

1. The counselor or ministry leader should use the *Suicide and Threat of Harm to Others Risk Assessment Interview Form* (Appendix I) to make a clear assessment of the situation.
2. Immediately report the threat to the pastor over the area of ministry.
3. The informed pastor should immediately report the threat to the Pastor of Counseling and Discipleship. If there is uncertainty about how to proceed with a suicide threat or threat of harm to others please convene a "counsel of three" who are ministry staff members to consult with one another and make a decision. This typically could be the pastor over that area of ministry, the Pastor of Counseling and one other.
4. An immediate course of action must be determined including alerting government authorities using 911.

18. Defining Caregivers and Training Terminology:

It is important to define this terminology, so we use terms consistently throughout the ministry and so expectations are defined.

Advocate—An individual who attends counseling with a counselee as spiritual support or to serve as a second adult when a minor is being counseled.

Council of Three—A group of ministry staff who are called upon to make a decision in a counseling situation when it is unclear how to proceed. A lay counselor may also be involved in the situation, but ministry staff must also be involved (usually the Pastor of Counseling and the pastor over the area of ministry being effected).

Counseling Ministry (First Counseling) Counselor—An individual who is a Level 1 or 2 member of ACBC and does at least ten hours of continuing education yearly (ACBC specializations count as continuing education).

Decision Counselor—An individual who has completed the necessary specialized training, in addition to the "Genuine Care" training, and who meets after the services with those who respond.

Discipler—An individual who provides Level 1 care. All listed in the triangle model as Level 1 caregivers (Appendix M).

First Baptist Counselor—An individual who is ACBC certified or, with rare exception, approved to counsel because of advanced training (for example, has an advanced degree in biblical counseling).

“Genuine Care” Training—basic training that all listed as Level 1 caregivers receive.

Marriage Mentors—Couples who have completed the necessary specialized training, in addition to the “Genuine Care” training, who serve as a first responder for marriage triage, and who can walk alongside of a newly married couple for the first year of their marriage.

Mediator—An individual who has attended the School of Mediation and has been approved by the Pastor of Counseling and Discipleship to lead mediations.

Small Group Leader—An individual who has been through the specialized necessary training in his/her area of service, in addition to the “Genuine Care” training, and works with a Sunday School class, Life group, etc.

Model Counselor—A certified counselor who has been approved to be observed by those completing the ten hours of observation for ACBC certification.

Observer—An individual who is completing observation hours for Phase One training.

Pastor—Ordained members of the staff.

Pathway through Certification—The tool designed by ACBC to help with retention. Anyone who is serious about certification should become a member of Pathway through Certification.

Phase One—This is the entry level training for ACBC certification (ACBC calls this Fundamentals training). Our version of this training requires 36 hours of training and a personal growth project, in addition to ACBC’s other requirements (see <https://biblicalcounseling.com/certification/> for more information).

Phase Two—This is the exam level of training for ACBC certification.

Phase Three—This level involves at least 50 counseling sessions mentored by an ACBC Fellow.

Specialized Training—training provided in specific areas of service.

Level 1 Spiritual friendship/Intentional discipleship (informal “counseling”)

Characteristics: Normal temptations, slight marriage tensions, mild stress
All members of the flock should be in these relationships. There is no category for a member not being in the “discipleship stream.”

Caregiver: Sunday School teacher; small group leader; decision counselor; camp counselors; small group leader; decision counselors; Prison Ministry volunteers; Deacons.

Required training: the Genuine Care training, plus specialized training in their area of service, or Phase One training (Biblical Care and Discipleship).

Level 2 Directive discipleship or purposeful care for suffering (can become formal counseling; Informed Consent Agreement possibly obtained)

Characteristics: distressed but functioning, more complex issues, more tension in relationships, more elevated concern, becomes consistent meeting about a life issue, significant suffering.

Caregivers: ACBC certified counselors or mediators; possibly those who have shown seriousness about completing the ACBC process; Deacons.

Required training: At a minimum completion of Phase 1 ACBC training; pursuing phases 2 or 3 is encouraged. For mediations, completion of The School of Mediation

Level 3 Corrective counseling (formal counseling, Informed Consent Agreement obtained)

Characteristics: all of the above, a crisis will occur if issues are not dealt with, distressed and not functioning well, elevated emotions, broken relationships, life dominating issue, not teachable or moderately teachable, unconfessed sin.

Caregivers: Pastors and female ministry staff; certified counselors; maybe First Counseling counselors; mediators; Deacons; Member Care and Restoration Committee members.

Required training: ACBC certification and possible School of Mediation training for mediation cases.

Level 4 Intensive (Informed Consent Agreement needed)

Characteristics: Crisis; broken relationships; life dominating sin; emotions out of control; not teachable; defensive; possibly isolated; possible church discipline if there is no repentance.

Caregivers: First Counseling counselors; some approved pastors who meet the First Counseling Ministry qualifications, mediators; Deacon Member Care and Restoration Committee.

Required training: ACBC certification and working on specializations, School of Mediation training for those who lead mediations.

Appendix A

COUNSELING TRAINEE/OBSERVER AGREEMENT

Welcome to First Counseling, the Counseling Ministry of First Baptist Church

First Counseling looks forward to your participation as a biblical counseling trainee. We hope that what you observe will serve you well as you pursue service to the Lord through your training. We are thankful for you and seek to serve you as you pursue your call to ministry for God's glory. Please take the time to read and sign this important document that explains what you should know, expect and agree to as a trainee.

What You Can Expect from Us and Why You Need to Be Involved

What Is Biblical Counseling?

Biblical counseling can be condensed into these four basic commitments: the rendering of gracious care and hope, the acquiring of personal information with a biblical interpretation, biblical truth, and specific application. It is intensely practical and relies heavily on the comprehensive gathering of information for understanding (Proverbs 25:11, 13).

Biblical counseling is counsel based on God's Word as the ultimate source of truth and restoration for the believer in Christ. For the First Counseling counselor, there is an operative conviction that God's Word is relevant to all of life and can be practically applied to every heart and every circumstance of difficulty. While this does not imply that Scripture is the only source of information in the counseling process, biblical counselors are consistent in their detailed biblical analysis of information and their overwhelming focus on the Bible, which alone is infallible, authoritative and sufficient truth for matters of eternal life and godliness (2 Timothy 3:16; Hebrews 4:12; 2 Peter 1:3ff). Every counseling system consists of certain elements. Biblical counseling is a complete system that is consistent with biblical theology.

Biblical counseling does not set aside real-life issues, but works to understand their origin, impact and involvement in the counselee's life from a biblical perspective. It acknowledges that the counselee possesses both physical and spiritual components that interact and affect one another because he or she is a whole spiritual person (2 Corinthians 4:16-18). It seeks to hear and understand the counselee and apply the truth of Scripture (gospel truths, who God is, and all the biblical elements of change) to the counselee's life, so that through Jesus Christ there can be restoration where there is brokenness (Revelation 21:5). The biblical counselor will also often refer the counselee to get a medical check-up to see if there are physical complications involved in the issue at hand.

The biblical counselor strives to relate the counselees not to themselves to bring about healing, but to Jesus Christ and His Word that sets men free (Hebrews 4:14-16; John 8:32). In doing so, biblical counseling is dependent on the collaborative, supernatural resources that God has provided for change (the work of the Holy Spirit, the Word of God, the grace of Jesus Christ through the gospel, and the involvement of the local church). As the counselees contemplate and apply who God is and His Word to their hearts and lives, they are over time transformed further into God's own image by the Holy Spirit's power (2 Corinthians 3:18; Philippians 2:12).

While behavioral change is important to this process of transformation, change within the counselee's heart (affections, thoughts, intentions) is essential as the counselor guides the

counselee to a right understanding of God, the counselee's situation, and how Christians change. Through cultivating the counselee's faith, gospel motivation, and desire for God's glory with prayerful diligent work, real change from the inside out is possible.

This redemptive transformation that takes place as the counselee's heart interacts with the Word of God brings hope, encouragement, conviction, repentance, and/or healing. As individuals find Christ sufficient, put to death the things of the flesh, and strengthen the things of the Spirit, joy and peace become realities in their Christian walk (Ephesians 4:24; Colossians 3:10). The biblical counselor is humbly privileged to see God work and assist in this process of spiritual growth and freedom toward God's glory.

Biblical Counseling and Psychotropic Medication

While we hold to the sufficiency of Scripture for counseling problems, we know that many who will come to us will have been prescribed medications by a physician. The biblical teaching on the importance of the body affirms the use of medication for physical problems. As biblical counselors, we do not offer medical advice including advice on withdrawing from medications. Our care for counselees may lead us to ask questions about the side-effects of medication, or whether the counselees have allowed the medication to take the place of the Lord as a refuge in their life. We will always encourage counselees with questions regarding medications, or who wish to discontinue using medications, to seek the advice of competent medical professionals before changing or discontinuing any medication.

What We Expect from You

What Is Your Role in Counseling?

We are so thankful for your desire to care for God's people through learning to provide loving counsel from His Word to those who are hurting. In attending counseling as a trainee, the requirements are fairly basic. We first ask for your commitment to see the counseling case through to its completion (only missing sessions in extreme situations). We ask that you would be **courteous, inconspicuous, and prompt** so that the counselor and counselee are able to proceed without any distractions. **Please only participate if the counselor asks you to do so.**

In sessions you will be privy to very personal information, often regarding sin in the counselee's life, as well as deeply painful events from his or her past. As part of honoring God and loving the counselee well, it is incredibly important that all information shared with you in counseling remains confidential. Should an issue concerning safety arise, the First Counseling counselor will address potential recourse based on the confidentiality limitations that will follow in this document.

As a trainee, you will be expected to exhibit Christ-like character in your communication throughout and following the counseling process in regard to any information you hear during sessions—letting no communication that is unwholesome/destructive come from your mouth, but only that which is good for building up (Ephesians 4:29-31).

Should you ever be unable to attend a counseling session, it will fall to the counselor to decide whether to proceed with the session without you. Though we appreciate your participation and are eager to help in your training, the counselor will most likely not be able to adjust scheduling to the trainee as he/she will be striving instead to plan around the counselee and the advocate's time.

The aforementioned expectations of your participation are consistent for all counseling at First Counseling. **Please also note, your ten hours of counseling observation must be with an approved ACBC certified counselor.**

Materials Needed for Counseling Sessions

1. Bible, notebook, pen/pencil
 - a. You are encouraged to take as many notes as you like, but do this quietly and effortlessly. A noisy pencil or shaking the counseling table with writing can be very distracting. The purpose of notes is to better help the counselor and the counselee.
 - b. Pertinent details of the first couple of sessions while gathering the counselee's history should be taken down, as well as questions you may have for the counselor as you listen.

2. Any assigned homework (if you also were asked to participate) and Counseling Observation Form
 - a. After each session, you are to fill out a "Counseling Observation Form." Each trainee reports on each session he or she observes. The Observation forms should be handled with great care and given only to the counselor.
 - b. The purpose of these reports is to benefit the trainee in processing the session and how to become a biblical counselor.

3. A humble, loving spirit that seeks your brother's or sister's good
 - a. You are expected to pray for the counselor leading the session and for the counselee receiving help.
 - b. You are also encouraged to keep the counselor and counselee in prayer in between sessions. We rely on God's Word and the Holy Spirit for guidance and help. This requires us to be a praying people.

I have read and agree to abide by the above information.

Observer Name (print): _____

Observer Signature: _____ **Date** _____

Appendix B

COUNSELING ADVOCATE AGREEMENT

Welcome to First Counseling, the Counseling Ministry of First Baptist Church!

First Counseling, the Counseling Ministry of First Baptist Church, thanks you for your willingness to accompany your friend or family member through counseling during his or her time of need. We ask that you take the time to read and sign this important document that explains what you should know, expect, and agree to as a counselee advocate.

What You Can Expect from Us

What Is Biblical Counseling?

Biblical counseling can be condensed into these four basic commitments: the rendering of gracious care and hope, the acquiring of personal information with a biblical interpretation, biblical truth, and specific application. It is intensely practical and relies heavily on the comprehensive gathering of information for understanding (Proverbs 25:11, 13).

Biblical counseling is counsel based on God's Word as the ultimate source of truth and restoration for the believer in Christ. For the counselor, there is an operative conviction that God's Word is relevant to all of life and can be practically applied to every heart and every circumstance of difficulty. While this does not imply that Scripture is the only source of information in the counseling process, biblical counselors are consistent in their detailed biblical analysis of information and their overwhelming focus on the Bible, which alone is infallible, authoritative and sufficient truth for matters of eternal life and godliness (2 Timothy 3:16; Hebrews 4:12; 2 Peter 1:3ff)

Biblical counseling does not set aside real-life issues, but works to understand their origin, impact and involvement in the counselee's life from a biblical perspective. It acknowledges that the counselee possesses both physical and spiritual components that interact and affect one another because the counselee is a whole spiritual person (2 Corinthians 4:16-18). It seeks to hear and understand the counselee and apply the truth of Scripture (gospel truths, who God is, and all the biblical elements of change) to the counselee's life, so that through Jesus Christ there can be restoration where there is brokenness (Revelation 21:5). The biblical counselor will also often refer the counselee to get a medical check-up to see if there are physical complications involved in the issue at hand.

The biblical counselor strives to relate the counselees not to themselves to bring about healing, but to Jesus Christ and Truth that sets men free (Hebrews 4:14-16; John 8:32). In doing so, biblical counseling is dependent on the collaborative, supernatural resources that God has provided for change (the work of the Holy Spirit, the Word of God, the grace of Jesus Christ through the gospel, and the involvement of the local church). As the counselees contemplate and apply who God is and his Truth to their hearts and lives, they are over time transformed further into God's own image by the Holy Spirit's power (2 Corinthians 3:18; Philippians 2:12).

While behavioral change is important to this process of transformation, change within the counselee's heart (affections, thoughts, intentions) is essential as the counselor guides the counselee to a right understanding of God, his/her situation, and how Christians change. Through cultivating the counselee's faith, gospel motivation, and desire for God's glory with prayerful diligent work, real change from the inside out is possible.

This redemptive transformation that takes place as the counselee's heart interacts with the Word of God brings hope, encouragement, conviction, repentance, and/or healing. As individuals find Christ sufficient, put to death the things of the flesh, and strengthen the things of the Spirit, joy and peace become realities in their Christian walk (Ephesians 4:24; Colossians 3:10). The biblical counselor is humbly privileged to see God work and assist in this process of spiritual growth and freedom toward God's glory.

Biblical Counseling and Psychotropic Medication

While we hold to the sufficiency of Scripture for counseling problems, we know that many who will come to us will have been prescribed medications by a physician. The biblical teaching on the importance of the body affirms the use of medication for physical problems. As biblical counselors, we do not offer medical advice including advice on withdrawing from medications. Our care for counselees may lead us to ask questions about the side-effects of medication, or whether the counselees have allowed the medication to take the place of the Lord as a refuge in their life. We will always encourage counselees with questions regarding medications, or who wish to discontinue using medications, to seek the advice of competent medical professionals before changing or discontinuing any medication.

What We Expect from You

What Is Your Role in Counseling?

We are so thankful for your care for your friend/family member in joining him/her in counseling. In attending counseling as an advocate, our expectation is that you would follow the counselor's lead, but join the counselor in spurring your brother or sister on toward Christ-likeness (Hebrews 10:34-25). In counseling sessions and throughout the week(s) between, you are expected to actively love your brother or sister as Christ does, with a humble, engaged heart and a gentle spirit, bearing with him or her in word, deed and prayer (John 13:34-35; Ephesians 4:2; John 17:20-21). Please only participate if the counselor asks you to do so.

In sessions you will most likely be privy to very personal information, often regarding sin in the counselee's life. As part of honoring God and loving the counselee well, it is incredibly important that all information shared with you in counseling remain confidential. Should an issue concerning safety arise, the counselor will address potential recourse based on the confidentiality limitations that will follow in this document. As an advocate, you will be expected to exhibit Christ-like character in your communication throughout and following the counseling process—letting no communication that is unwholesome/destructive come from your mouth, but only that which is good for building up your brother or sister (Ephesians 4: 29-31).

As long as you have agreed to fulfill the role of advocate for the counselee, you are expected to consistently attend sessions with the counselee in such a way that the counselee's care is your priority. If the counselor assigns counselee homework that you are also asked to complete, you are expected to do so in a way that contributes to the counseling process. Please be on time for sessions and be prepared to fully engage to best serve your friend or family member, as well as the counselor seeking to help him or her. Should you ever be unable to attend a counseling session, it will fall to the counselor to decide whether to proceed with the session without you. In many cases, the counselor may choose not to hold sessions without an advocate present. This is to restate the fact that your consistent participation is extremely important to the counselee's care. Please see it as such before agreeing to be an advocate.

While some counselors may bring you into the sessions in a more involved way than others, the aforementioned expectations of your participation are consistent for all counseling at First Counseling.

Materials Needed for Counseling Sessions

1. Bible, notebook, pen/pencil
2. Any assigned homework (if you also were asked to participate)
3. A humble, loving spirit that seeks your brother/sister's good

Confidentiality - Confidentiality is an important aspect of the counseling process, and we will carefully guard the information counselees entrust to us. There are situations, however, in which the counselors may believe that it is wise or mandated (biblically or legally) for them to share certain information with others. It is not possible to list every possible circumstance, but some examples would include:

1. When a counselor is uncertain how to address a problem and needs to seek advice from another pastor or counselor.
2. When there is concern that someone may be harmed unless others intervene.
3. When abuse or another crime must be reported to the authorities.
4. When a person refuses to renounce a particular sin and it becomes necessary to seek the assistance of others in the church to encourage repentance and reconciliation or to begin the process of church discipline (Proverbs 15:22, 24:11; Matthew 18:15-20).
5. When observers sit in on counseling sessions to assist the counselor or for training purposes (including audio & video recordings-only with permission).
6. When the counselee's pastor, staff and/or church leadership is needed to provide pastoral assistance.
7. When the counselor is legally required to provide information or testimony in a legal proceeding.

Please be assured that our counselors strongly prefer not to disclose personal information to others, and they will make every effort to help the counselee find ways to resolve a problem as privately as possible.

Legal Release

Your signature below serves as acknowledgement that you have read and understand the information contained in this document. As one accompanying a person receiving counseling, I understand the following:

1. I agree to observe biblical counseling knowing what it is and is not.
2. I understand the Counseling Ministry's counselor is not a licensed psychologist, mental health counselor, or health care provider; does not adhere to the typical theories and models of traditional "psychology"; and is not constrained by the ethical guidelines associated with a state or national license.
3. I understand that the counselee has the ability to choose other forms of care offered outside of the Counseling Ministry.
4. I understand that the counselee has expressly waived any and all legal rights regarding confidentiality (including the requirement that no information can be released without his/her written authorization) in favor of the Counseling Ministry's limits of confidentiality.

5. Subject to the provisions of this advocate agreement form (including confidentiality), I am free to end my advocacy sessions at any time.
6. The assigned Counseling Ministry counselor is free to end the counseling sessions at any time.
7. I hereby acknowledge that I have had the opportunity to seek the advice of independent legal counsel and that I have read and understood all of the terms and provisions of this Agreement.

I expressly waive the right to sue the assigned counselor, the Counseling Ministry, its staff, or anyone else connected with the ministry in a court of law—this waiver will be binding on all family members, heirs, legal guardians, attorneys, etc. who might take action in connection with or on behalf of the person being care for.

Resolution of Conflicts (Arbitration) - On rare occasions a conflict may develop between a counselor and a counselee. In order to make sure that any such conflicts will be resolved in a biblically faithful manner, we require all of our counselees and their advocates to agree that any dispute that arises with a counselor, the Counseling Ministry, or our certifying agencies, as a result of counseling will be settled by mediation and, if necessary, legally binding arbitration in accordance with the Rules of Procedure of the Institute for Christian Conciliation (www.aorhope.org/icc-rules); judgment upon an arbitration award may be entered in any court having jurisdiction. It is expressly understood that by agreeing in advance to arbitrate that the counselee is giving up his right to a trial in the civil courts.

Counselee's Name (print): _____

Advocate Name (print): _____ **Phone** _____

Advocate Signature: _____ **Date** _____

Appendix C - The Counseling Ministry Form



FIRST COUNSELING

BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

INFORMED CONSENT AGREEMENT

Our Goal - Our goal in providing biblical counseling is to help you meet the challenges of life in a way that will please and honor the Lord Jesus Christ (1 Corinthians 10:31) and in a way that will bring you the greatest joy and satisfaction (John 15:11).

Biblical Basis - As ministers of the gospel of Jesus Christ our counseling stems from our sincerely held religious beliefs based upon the Bible, including our understanding of sexuality. This is part of our practice of religion. We believe that the Bible provides thorough guidance and instruction for faith and life (2 Timothy 3:16-17; 2 Peter 1:3). Therefore, our counseling is based upon scriptural principles. *Our counselors are not trained or licensed as psychotherapists or mental health professionals, nor should they be expected to follow the methods of such specialists.*

All counseling will be conducted in accordance with the counselor's understanding of the Scriptures. However, our counselors do not know all there is to know about biblical teaching and its application to life. Therefore, when necessary, they will seek help, input, or advice from pastors, mentors, or colleagues.

Biblical Counsel - If you have significant legal, financial, medical or other technical questions you should seek advice from an independent professional. Our counselors will cooperate with such advisors and help you to consider their counsel in light of scriptural principles. Our counselors are certified through the ACBC (Association of Certified Biblical Counselors) and approved by First Counseling or are in the supervision process for their ACBC certification.

Counseling Observers - Because we are a training facility, our counselors often "team counsel." You will meet with a biblical counselor, who will lead the session, and a counseling trainee(s), who will observe as part of his/her certification requirement.

Confidentiality - Confidentiality is an important aspect of the counseling process, and we will carefully guard the information you entrust to us. There are situations, however, in which the counselors may believe that it is wise or mandated (biblically or legally) for them to share certain information with others. It is not possible to list every possible circumstance, but some examples would include (please initial you understand and accept each example):

1. When a counselor is uncertain how to address a problem and needs to seek advice from another pastor or counselor. _____
2. When there is concern that someone may be harmed unless others intervene. _____
3. When abuse or another crime may have occurred. _____
4. When a person refuses to renounce a particular sin and it becomes necessary to seek the assistance of others in the church to encourage repentance and reconciliation or

to begin the process of church discipline (Proverbs 15:22, 24:11; Matthew 18:15-20).

5. _____ When observers sit in on counseling sessions to assist the counselor or for training purposes (including audio & video recordings—only with permission). _____
6. When the counselee's pastor, staff and/or church leadership is needed to provide pastoral assistance. _____
7. When the counselor is legally required to provide information or testimony in a legal proceeding. _____

Please be assured that our counselors strongly prefer not to disclose personal information to others, and they will make every effort to help you find ways to resolve a problem as privately as possible.

Biblical Counseling and Psychotropic Medication - While we hold to the sufficiency of Scripture for counseling problems, we know that many who will come to us will have been prescribed medications by a physician. The biblical teaching on the importance of the body affirms the use of medication for physical problems. As biblical counselors, we do not offer medical advice including advice on withdrawing from medications. Our care for counselees may lead us to ask questions about the side-effects of medication, or whether the counselees have allowed the medication to take the place of the Lord as a refuge in their life. We will always encourage counselees with questions regarding medications, or who wish to discontinue using medications, to seek the advice of competent medical professionals before changing or discontinuing any medication. Please initial you understand/accept this. _____

Our Fee - Though it may be necessary for you to purchase materials for your own use, the actual discipleship counseling is done *free of charge* as a ministry to our church and community.

Parental Involvement - When counselees are under the age of 18, we require parents to be involved in the counseling process; this includes the following: counseling sessions, homework, and/or accountability for their child.

Church Involvement: Because we believe the local church has a vital role in the lives of believers (Hebrews 3:13-13; 10:24-25), counselees are asked to commit to attending faithfully their Sunday School class and worship services while receiving counseling.

Church Advocates for Non-members: Because we believe counseling should be the primary responsibility of your home church, you will need to bring a church leader or someone in spiritual leadership as your Advocate; for women, it would be a woman who is in a place of spiritual leadership at your church. This is beneficial for every person involved in the counseling process (Hebrews 13:17; 1 Peter 5:1-2). Please see the Church/Pastor Recommendation form for additional information.

Resolution of Conflicts (Arbitration) - On rare occasions a conflict may develop between a counselor and a counselee. In order to make sure that any such conflicts will be resolved in a biblically faithful manner, we require all of our counselees to agree that any dispute that arises with a counselor, First Counseling, or our certifying agencies, as a result of counseling will be settled by mediation and, if necessary, legally binding arbitration in accordance with the Rules

of Procedure of the Institute for Christian Conciliation (www.aorhope.org/icc-rules); judgment upon an arbitration award may be entered in any court having jurisdiction. *It is expressly understood that by agreeing in advance to arbitrate that the counselee is giving up his right to a trial in the civil courts.*

Conclusion & Signature - Having clarified the principles and policies of our counseling ministry, we welcome the opportunity to minister to you in the name of Christ and to be used by Him as He helps you to grow in spiritual maturity and prepares you for usefulness in His body. If you have any questions about these guidelines or conditions, please speak with your counselor or someone at First Counseling.

Having read the foregoing information and conditions fully and completely, my signature below indicates that I understand all the material presented and fully agree to comply with the foregoing, and I consent to the disclosure of certain communications as provided above and waive any legal privileges that may apply.

Name (please print): _____

Parent/Guardian Name*: _____

Signature: _____

Parent/Guardian Signature: _____

Date: _____

* only required if counselee is under 18 years of age

Appendix C - General Form



**First Baptist Church
Jacksonville**

INFORMED CONSENT AGREEMENT

Our Goal - Our goal in providing biblical counseling is to help you meet the challenges of life in a way that will please and honor the Lord Jesus Christ (1 Corinthians 10:31) and in a way that will bring you the greatest joy and satisfaction (John 15:11).

Biblical Basis - As ministers of the gospel of Jesus Christ our counseling stems from our sincerely held religious beliefs based upon the Bible, including our understanding of sexuality. This is part of our practice of religion. We believe that the Bible provides thorough guidance and instruction for faith and life (2 Timothy 3:16-17; 2 Peter 1:3). Therefore, our counseling is based upon scriptural principles. *Our counselors are not trained or licensed as psychotherapists or mental health professionals, nor should they be expected to follow the methods of such specialists.*

All counseling will be conducted in accordance with the counselor's understanding of the Scriptures. However, our counselors do not know all there is to know about biblical teaching and its application to life. Therefore, when necessary, they will seek help, input, or advice from pastors, mentors, or colleagues.

Biblical Counsel - If you have significant legal, financial, medical or other technical questions you should seek advice from an independent professional. Our counselors will cooperate with such advisors and help you to consider their counsel in light of scriptural principles. Our counselors are certified through the ACBC (Association of Certified Biblical Counselors) and approved by First Counseling or are in the supervision process for their ACBC certification.

Counseling Observers - Because we are a training facility, our counselors often "team counsel." You will meet with a biblical counselor, who will lead the session, and a counseling trainee(s), who will observe as part of his/her certification requirement.

Confidentiality - Confidentiality is an important aspect of the counseling process, and we will carefully guard the information you entrust to us. There are situations, however, in which the counselors may believe that it is wise or mandated (biblically or legally) for them to share certain information with others. It is not possible to list every possible circumstance, but some examples would include (please initial you understand and accept each example):

1. When a counselor is uncertain how to address a problem and needs to seek advice from another pastor or counselor. _____
2. When there is concern that someone may be harmed unless others intervene. _____
3. When abuse or another crime may have occurred. _____

4. When a person refuses to renounce a particular sin and it becomes necessary to seek the assistance of others in the church to encourage repentance and reconciliation or to begin the process of church discipline (Proverbs 15:22, 24:11; Matthew 18:15-20). _____
5. When observers sit in on counseling sessions to assist the counselor or for training purposes (including audio & video recordings-only with permission). _____
6. When the counselee's pastor, staff and/or church leadership is needed to provide pastoral assistance. _____
7. When the counselor is legally required to provide information or testimony in a legal proceeding. _____

Please be assured that our counselors strongly prefer not to disclose personal information to others, and they will make every effort to help you find ways to resolve a problem as privately as possible.

Biblical Counseling and Psychotropic Medication - While we hold to the sufficiency of Scripture for counseling problems, we know that many who will come to us will have been prescribed medications by a physician. The biblical teaching on the importance of the body affirms the use of medication for physical problems. As biblical counselors, we do not offer medical advice including advice on withdrawing from medications. Our care for counselees may lead us to ask questions about the side-effects of medication, or whether the counselees have allowed the medication to take the place of the Lord as a refuge in their life. We will always encourage counselees with questions regarding medications, or who wish to discontinue using medications, to seek the advice of competent medical professionals before changing or discontinuing any medication. Please initial you understand/accept this. _____

Our Fee - Though it may be necessary for you to purchase materials for your own use, the actual discipleship counseling is done *free of charge* as a ministry to our church and community.

Parental Involvement - When counselees are under the age of 18, we require parents to be involved in the counseling process; this includes the following: counseling sessions, homework, and/or accountability for their child.

Church Involvement: Because we believe the local church has a vital role in the lives of believers (Hebrews 3:13-13; 10:24-25), counselees are asked to commit to attending faithfully their Sunday School class and worship services while receiving counseling.

Church Advocates for Non-members: Because we believe counseling should be the primary responsibility of your home church, you will need to bring a church leader or someone in spiritual leadership as your Advocate; for women, it would be a woman who is in a place of spiritual leadership at your church. This is beneficial for every person involved in the counseling process (Hebrews 13:17; 1 Peter 5:1-2). Please see the Church/Pastor Recommendation form for additional information.

Resolution of Conflicts (Arbitration) - On rare occasions a conflict may develop between a counselor and a counselee. In order to make sure that any such conflicts will be resolved in a biblically faithful manner, we require all of our counselees to agree that any dispute that arises

with a counselor, First Counseling, or our certifying agencies, as a result of counseling will be settled by mediation and, if necessary, legally binding arbitration in accordance with the Rules of Procedure of the Institute for Christian Conciliation (www.aorhope.org/icc-rules); judgment upon an arbitration award may be entered in any court having jurisdiction. *It is expressly understood that by agreeing in advance to arbitrate that the counselee is giving up his right to a trial in the civil courts.*

Conclusion & Signature - Having clarified the principles and policies of our counseling ministry, we welcome the opportunity to minister to you in the name of Christ and to be used by Him as He helps you to grow in spiritual maturity and prepares you for usefulness in His body. If you have any questions about these guidelines or conditions, please speak with your counselor.

Having read the foregoing information and conditions fully and completely, my signature below indicates that I understand all the material presented and fully agree to comply with the foregoing, and I consent to the disclosure of certain communications as provided above and waive any legal privileges that may apply.

Name (please print): _____

Parent/Guardian Name*: _____

Signature: _____

Parent/Guardian Signature: _____

Date: _____

* only required if counselee is under 18 years of age

Appendix D - The Counseling Ministry Personal Data Inventory Form



FIRST COUNSELING
BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

Personal Data Inventory

Please complete this inventory carefully

Personal Identification

Today's Date: _____

Name: _____ Birth Date: _____

Address: _____ Zip Code: _____

Age: _____ Gender: _____ Referred By: _____

Marital Status: Single: _____ Engaged: _____ Married: _____
Separated: _____ Divorced: _____ Widowed: _____

Education (highest level completed): _____

Preferred Phone: _____ Is this home, cell, or work? _____

Email: _____

Employer: _____ Position: _____

Years: _____

Marriage and Family

Spouse: _____ Birth Date: _____

Age: _____ Occupation: _____ How Long Employed: _____

Preferred Phone: _____ Is this home, cell, or work? _____

Date of Marriage: _____ Length of Dating: _____

Give a brief statement of circumstances of meeting and dating: _____

Have either of you been previously married: _____ To Whom: _____

Have you ever been separated: _____ Filed for divorce: _____

Is your spouse willing to come for counseling: _____

Is your spouse in favor of your coming: _____ If no, please explain: _____

Information about Children:

Name: Age: Gender: Living: Year Ed. Step-Child:

Describe relationship to your father: _____

Describe relationship to your mother: _____

Number of sibling(s): _____ Your sibling order: _____

Did you live with anyone other than parents? _____

Are your parents living? _____

Health

Describe your health: _____

Do you have any chronic conditions? _____ What? _____

List important illnesses and injuries or handicaps: _____

Date of last medical exam: _____ Report: _____

Physician's name and contact information:

Current medication(s) and dosage:

Have you ever-used drugs for anything other than medical purposes? _____

If yes, please explain:

Have you ever been arrested? _____

Do you drink alcoholic beverages? _____

If so, how frequently and how much? _____

Do you drink coffee? _____ How much? _____

Other caffeine drinks? _____ How much? _____

Do you smoke cigarettes or use tobacco products? _____ Frequency: _____

Have you ever had interpersonal problems on the job? _____ If yes, please explain: _____

Have you ever had a severe emotional upset? _____ If yes, please explain: _____

Have you ever seen a psychiatrist or counselor? _____ If yes, please explain: _____

Are you willing to sign a release of information form so that your counselor may write for social, psychiatric, or other medical records: _____

Spiritual

Denominational preference: _____

Church attending: _____ Member: _____

Church attendance per month (circle): 0 1 2 3 4 5 6 7 8+

Do you believe in God: ___ Do you pray: ___ Would you say you are a Christian? _____, or still in the process of becoming a Christian? _____

Have you ever been baptized? _____

How often do you read the Bible? Never: ___ Occasionally: ___ Often: ___ Daily: ___

Explain any recent changes in your religious life:

Financial

Approximate yearly family income: _____

Do you own your home? _____ yes _____ no

Do you have significant debt in any of the following areas?

_____ home _____ car _____ school _____ credit cards

Are you saving money? _____ yes _____ no

Do you give money to your church or other charities? _____ yes _____ no

Is money a source of struggle or discomfort in your life? _____ yes _____ no

Are you involved in or anticipate being involved in legal actions? _____ yes _____ no

Women Only

Have you had any menstrual difficulties? _____ If you experience tension, tendency to cry, other symptoms prior to your cycle, please explain: _____

YOUR INFORMATION

We are grateful to the LORD for the opportunity to meet with you and sincerely desire to understand what is happening in your life. The below checklist and questions are a way for us to gather more information about what is going on. You can check as many boxes as you need, and your answers can be as long as you like but please write at least a few sentences for each question. **(If additional space is needed, please feel free to answer the questions in a separate document.)** Thank you for your help, and we will be prayerfully anticipating our meeting.

Problem Check List

- | | | |
|--|--|--|
| <input type="checkbox"/> Anger | <input type="checkbox"/> Drunkenness | <input type="checkbox"/> Loss of Loved One |
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Eating problems | <input type="checkbox"/> Lust |
| <input type="checkbox"/> Apathy | <input type="checkbox"/> Envy | <input type="checkbox"/> Memory |
| <input type="checkbox"/> Appetite | <input type="checkbox"/> Fear | <input type="checkbox"/> Moodiness |
| <input type="checkbox"/> Bitterness | <input type="checkbox"/> Finances | <input type="checkbox"/> Perfectionism |
| <input type="checkbox"/> Change in lifestyle | <input type="checkbox"/> Gluttony | <input type="checkbox"/> Pornography |
| <input type="checkbox"/> Children | <input type="checkbox"/> Guilt | <input type="checkbox"/> Rebellion |
| <input type="checkbox"/> Communication | <input type="checkbox"/> Health | <input type="checkbox"/> Sex |
| <input type="checkbox"/> Conflict (fights) | <input type="checkbox"/> Homosexuality | <input type="checkbox"/> Sleep |
| <input type="checkbox"/> Deception | <input type="checkbox"/> Impotence | <input type="checkbox"/> Spousal Abuse |
| <input type="checkbox"/> Decision Making | <input type="checkbox"/> In-laws | <input type="checkbox"/> A Vice |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Loneliness | <input type="checkbox"/> Other |

Please Tell Us Your "STOREE."

*It will be helpful to have at least a few sentences or short paragraph for each letter of STOREE.
(If additional space is needed, please feel free to answer the questions in a separate document.)*

Thank you for your help, and we will be prayerfully anticipating our meeting.

Situation: What seems to be the main problem?

Thinking: What do you think or wonder about yourself in relation to the situation?
What do you think of others in relation to the situation?

Others: How are others involved? How does this issue impact others? What have others done to compound or alleviate the problem?

Response: What are you doing about this issue? What have you done to try to address this issue in the past? What are your typical actions or reactions to this problem (e.g. "I get angry and go for a drive")? In general, when you are feeling pressure in life, how does it come out? What do you do? How are you sleeping?

Emotions: What do you fear? What would give you peace, related to this situation?
What is the emotion you are struggling with the most?

Desires/Expectations: How do you hope we can help you? What do you want the most related to this situation?

Is there anything else we should know?

Appendix D - General Personal Data Inventory Form



**First Baptist Church
Jacksonville**

Personal Data Inventory

Please complete this inventory carefully

Personal Identification

Today's Date: _____

Name: _____ Birth Date: _____

Address: _____ Zip Code: _____

Age: _____ Gender: _____ Referred By: _____

Marital Status: Single: _____ Engaged: _____ Married: _____
Separated: _____ Divorced: _____ Widowed: _____

Education (highest level completed): _____

Preferred Phone: _____ Is this home, cell, or work? _____

Email: _____

Employer: _____ Position: _____

Years: _____

Marriage and Family

Spouse: _____ Birth Date: _____

Age: _____ Occupation: _____ How Long Employed: _____

Preferred Phone: _____ Is this home, cell, or work? _____

Date of Marriage: _____ Length of Dating: _____

Give a brief statement of circumstances of meeting and dating: _____

Have either of you been previously married: _____ To Whom: _____

Have you ever been separated: _____ Filed for divorce: _____

Is your spouse willing to come for counseling: _____

Is your spouse in favor of your coming: _____ If no, please explain: _____

Information about Children:

Name: _____ Age: _____ Gender: _____ Living: _____ Year Ed. _____ Step-Child: _____

Describe relationship to your father: _____

Describe relationship to your mother: _____

Number of sibling(s): _____ Your sibling order: _____

Did you live with anyone other than parents? _____

Are your parents living? _____

Health

Describe your health: _____

Do you have any chronic conditions? _____ What? _____

List important illnesses and injuries or handicaps: _____

Date of last medical exam: _____ Report: _____

Physician's name and contact information:

Current medication(s) and dosage:

Have you ever-used drugs for anything other than medical purposes? _____

If yes, please explain:

Have you ever been arrested? _____

Do you drink alcoholic beverages? _____

If so, how frequently and how much? _____

Do you drink coffee? _____ How much? _____

Other caffeine drinks? _____ How much? _____

Do you smoke cigarettes or use tobacco products? _____ Frequency: _____

Have you ever had interpersonal problems on the job? _____ If yes, please explain: _____

Have you ever had a severe emotional upset? _____ If yes, please explain: _____

Have you ever seen a psychiatrist or counselor? _____ If yes, please explain: _____

Are you willing to sign a release of information form so that your counselor may write for social, psychiatric, or other medical records: _____

Spiritual

Denominational preference: _____

Church attending: _____ Member: _____

Church attendance per month (circle): 0 1 2 3 4 5 6 7

Do you believe in God: ___ Do you pray: ___ Would you say you are a Christian? _____,

or still in the process of becoming a Christian? _____

Have you ever been baptized? _____

How often do you read the Bible? Never: ___ Occasionally: ___ Often: ___ Daily: ___

Explain any recent changes in your religious life:

Financial

Approximate yearly family income: _____

Do you own your home? _____ yes _____ no

Do you have significant debt in any of the following areas?

_____ home _____ car _____ school _____ credit cards

Are you saving money? _____ yes _____ no

Do you give money to your church or other charities? _____ yes _____ no

Is money a source of struggle or discomfort in your life? _____ yes _____ no

Are you involved in or anticipate being involved in legal actions? _____ yes _____ no

Women Only

Have you had any menstrual difficulties? _____ If you experience tension, tendency to cry, other symptoms prior to your cycle, please explain: _____

YOUR INFORMATION

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| <input type="checkbox"/> Bitterness | <input type="checkbox"/> Finances | <input type="checkbox"/> Perfectionism |
| <input type="checkbox"/> Change in lifestyle | <input type="checkbox"/> Gluttony | <input type="checkbox"/> Pornography |
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| <input type="checkbox"/> Communication | <input type="checkbox"/> Health | <input type="checkbox"/> Sex |
| <input type="checkbox"/> Conflict (fights) | <input type="checkbox"/> Homosexuality | <input type="checkbox"/> Sleep |
| <input type="checkbox"/> Deception | <input type="checkbox"/> Impotence | <input type="checkbox"/> Spousal Abuse |
| <input type="checkbox"/> Decision Making | <input type="checkbox"/> In-laws | <input type="checkbox"/> A Vice |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Loneliness | <input type="checkbox"/> Other |

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Response: What are you doing about this issue? What have you done to try to address this issue in the past? What are your typical actions or reactions to this problem (e.g. "I get angry and go for a drive")? In general, when you are feeling pressure in life, how does it come out? What do you do? How are you sleeping?

Emotions: What do you fear? What would give you peace, related to this situation?
What is the emotion you are struggling with the most?

Desires/Expectations: How do you hope we can help you? What do you want the most related to this situation?

Is there anything else we should know?

Appendix E



FIRST COUNSELING
BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

CONCLUSION OF COUNSELING-COUNSELOR

Conclusion Date: _____

Biblical Counselor: _____

On the above listed date, the counseling relationship between _____ and the above named counselor was concluded. The primary reason for the conclusion was:

- _____ Attained counseling goals
- _____ A lack of progress in resolving issues
- _____ Scheduling problems
- _____ Other

Please answer the following questions.

1. Was your counselee’s problem resolved or helped? Please explain.

2. What is your plan for growth for the counselee as they graduate counseling and move into discipleship within the church?

3. What is something you learned from this counseling case?

4. Has your counselee filled out their *End of Counseling* form? If not, why?

Counselor, please complete and return this “Conclusion of Counseling” form to the First Counseling office within two weeks of your counselee concluding his or her counseling with you. Thank you!



FIRST COUNSELING

BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

CONCLUSION OF COUNSELING - COUNSELEE

Conclusion Date: _____

Biblical Counselor: _____

On the above listed date, the counseling relationship between _____ and the above named counselor was concluded. The primary reason for the conclusion was:

_____ Attained counseling goals

_____ A lack of progress in resolving issues

_____ Scheduling problems

_____ Other

Please answer the following questions.

1. Was your problem resolved or helped? Please explain.
2. Would you recommend the Counseling Ministry for Biblical Counseling? Please explain.
3. Would you recommend your biblical counselor to others? Please explain.
4. If willing, please leave a 2-3 sentence testimony about your experience with Biblical Counseling.

Would you be willing to share this testimony with others?

_____ YES

_____ NO

_____ ANONYMOUSLY

Thank you for taking the time to complete this "Conclusion of Counseling" form. Please return it to the First Counseling office by email (counselingministry@fbcjax.com) or mail (125 West Ashley Street, Jacksonville, FL 32202).

Appendix F

MANDATORY REPORTING OF CHILD ABUSE CHECKLIST

Who needs to report?

There are two types of reporters:

† Mandated reporter:

- Any person who knows, or has reasonable cause to suspect, that a **child** is abused, abandoned, or neglected by a parent, legal custodian, caregiver, or other person responsible for the child's welfare is a mandatory reporter. §39.201(1)(a), Florida Statutes.
- Any person, including but not limited to state, county, or municipal criminal justice employees or law enforcement officers, who knows or has reasonable cause to suspect that a vulnerable **adult** has been or is being abused, neglected, or exploited must make a report. §415.1034(a), Florida Statutes.

† Professionally mandated reporter - Anyone who is legally obligated to report known abuse and must also identify themselves when reporting. These include:

- Physician, osteopathic physician, medical examiner, chiropractic physician, nurse, or hospital personnel engaged in the admission, examination, care, or treatment of persons;
- Health or mental health professional;
- Practitioner who relies solely on spiritual means for healing;
- School teacher or other school official or personnel;
- Social worker, day care center worker, or other professional child care, foster care, residential or institutional worker;
- Law enforcement officer;
- Judge, §39.201(1)(d)(1)-(7), Florida Statutes; or
- Mediators. §44.405(4)(a)(3), Florida Statutes.

† Note: An officer or employee of the judicial branch is not required to again provide notice of reasonable cause to suspect child abuse, abandonment, or neglect when that child is currently being investigated by the Department of Children and Families, there is an existing dependency case, or the matter has previously been reported to the Department, provided that there is reasonable cause to believe that the information is already known to the department. This paragraph applies only when the information has been provided to the officer or employee in the course of carrying out his or her official duties. §39.201(1)(f), Florida Statutes.

What needs to be reported?

Child Abuse:

- ✦ A child in need of supervision who has no parent, legal custodian, or responsible adult. §39.201(1)(a), Florida Statutes.

- ✦ A child abused by a parent, caregiver, guardian, or other person responsible for the child's welfare. §39.201(1)(a), Florida Statutes.
- ✦ Child abuse, abandonment, or neglect by any adult. §39.201(1)(b), Florida Statutes.
- ✦ Child abuse by a juvenile sex offender. §39.201(1)(c), Florida Statutes.
- ✦ If the report contains information of an instance of known or suspected child abuse involving impregnation of a child under 16 years of age by a person 21 years of age or older, the report shall be made immediately to the appropriate county sheriff's office or other appropriate law enforcement agency. §39.201(2)(e), Florida Statutes.
- ✦ Reports involving surrendered newborn infants shall be made and received by the department. §39.201(1)(g), Florida Statutes.

Sexual Battery:

- ✦ Section 794.027, Florida Statutes, requires that any person who observes a sexual battery and who has the ability to seek assistance for the victim without being exposed to a threat of physical violence must make a report.

Vulnerable adult abuse:

- ✦ Section 415.1034(1), Florida Statutes, states that any person, including, but not limited to any state, county, or municipal criminal justice employee or law enforcement officer, who knows, or has reasonable cause to suspect, that a vulnerable adult has been or is being abused, neglected, or exploited shall immediately report such knowledge or suspicion to the central abuse hotline.

Who do you report it to?

- ✦ Child and adult abuse should be reported to the Florida Department of Children and Families (DCF) through either the DCF statewide hotline (call 1-800-96-ABUSE) (1-800-962-2873) or through the DCF website at <http://reportabuse.dcf.state.fl.us>. The hotline also accepts faxes at 1-800-914-0004 and web-based chat on their website. §39.201(2)(a), Florida Statutes.
- ✦ If the abuse is by an adult other than a parent, legal custodian, caregiver, or other person responsible for the child's welfare, the report will be transferred by hotline staff to the appropriate county sheriff's office. §39.201(2)(b), Florida Statutes.
- ✦ If the abuse is by a juvenile sex offender age 12 or under, the report will be transferred by hotline staff to a local county sheriff's office within 48 hours and a DCF assessment will be conducted. §39.201(2)(c)(2), Florida Statutes.
- ✦ If abuse is by a juvenile sex offender age 13 or over, the report will be transferred to a local county sheriff's office by hotline staff within 48 hours. §39.201(2)(c)(3), Florida Statutes.

What happens if you don't report?

- ✦ Failure to report child abuse to DCF is a third degree felony. §39.205(1), Florida Statutes.
- ✦ Section 794.027, Florida Statutes, provides that a person who observes the commission of the crime of sexual battery is guilty of a first degree misdemeanor where that person 1) has reasonable grounds to believe that he or she has observed the commission of a sexual battery; 2) has the present ability to seek assistance for the victim or victims by immediately reporting such offense to a law enforcement officer; 3) fails to seek such assistance; 4) would not be exposed to any threat of physical violence for seeking such assistance; 5) is not the husband, wife, parent, grandparent, child, grandchild, brother or sister of the offender or victim, by consanguinity or affinity; and 6) is not the victim of such sexual battery.

What happens after the report is made?

- ✦ Once a report is received, the hotline counselor sends the report within one hour to the county investigation office where the victim is located. An investigator is assigned and will respond as soon as possible if the victim is in imminent risk of harm, or within 24 hours if imminent risk is not present. The investigator may or may not contact the reporter during the investigation.

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Appendix G



FIRST COUNSELING
BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

INTERVIEW FORM FOR SEXUAL ABUSE VICTIMS

Name: _____ Age: _____

Address: _____
Street Home Phone
City State Cell Phone

School: _____ Grade: _____

Names of: _____
Parents / Guardians / Caretakers

Address (only if different):

City State Zip

Household Members:

Have you ever touched someone or been touched in a way that you felt uncomfortable as a result, or have you ever seen things that made you feel uncomfortable?
Yes _____
No _____

Can you name the person involved? _____ Age: _____

Your relationship with this person? _____

Can you tell us what happened? _____

INTERVIEW FORM - Page 2

Name: _____

Your age(s) when events occurred? _____

Location(s) where events occurred? _____

Who else is aware of these events? _____

Who do you feel most safe with when they are caring for you?

Have you witnessed any other events you would like to tell us about? Yes ____ No ____

Can you tell us what happened?

Who is there to support you in your community? _____

Next Steps Resources provided: Yes ____ No ____

Comments: _____

Care Team Member: _____ Phone: _____

Additional information regarding reported abuse: _____

Recommendations:

Printed Name: _____ Date: _____

Signature, Credentials: _____

Appendix H

**Mandatory Reporting Obligations,
including Understanding “Clergy-Client
Privilege” First Baptist Church Jacksonville**

| | Florida | Georgia |
|-------------------------------|---|--|
| What must be reported? | <ul style="list-style-type: none"> • Abuse, abandonment or neglect of a child • Abuse, neglect or financial exploitation of a vulnerable adult (disabled or elderly person over age 18) | <ul style="list-style-type: none"> • Child abuse, including physical injury, neglect or exploitation, endangerment, and sexual abuse or exploitation • Abuse, neglect or exploitation of a disabled adult or elder person |
| Who must report it? | <p>Any person who knows or has reasonable cause to suspect that such abuse, abandonment, neglect or financial exploitation has occurred or is occurring.</p> | <p>The following persons must report if they have reasonable cause to believe that abuse has occurred: • Child abuse: doctors and other medical professionals; licensed counselors, social workers and mental health professionals; school employees; law enforcement personnel; <i>“child counseling personnel”</i> and <i>“child service organization personnel”</i> (employees or volunteers of any organization that provides counseling, education, supervision and/or other services to children)</p> <ul style="list-style-type: none"> • Disabled/elder abuse: all persons required to report child abuse, plus physical and occupational therapists, day-care personnel, coroners and medical examiners, emergency medical services personnel, financial institution employees, and <i>clergy members</i> <p>Any other person may report child abuse or disabled/elder abuse but is not required to do so.</p> |

| | | |
|---|--|---|
| <p>Is there any privilege preventing report or disclosure?</p> | <p>Yes, there is a privilege that may prevent the reporting or disclosure of the information if all of the following are met:</p> <ol style="list-style-type: none"> 1) the communication is made to a member of the clergy (a priest, rabbi, practitioner of Christian Science, or a minister of any religious organization or denomination usually referred to as a church) or a person reasonably believed to be a clergy member by the confider; 2) the confider made the communication for the purpose of seeking spiritual counseling and advice; 3) the clergy member receives the communication in the usual course of his or her practice or discipline; and 4) the communication is made privately and not intended for further disclosure. The privilege may be claimed by the confider, his or her guardian or personal representative, or the clergy member. If any of these persons claims the privilege, the clergy member must not report or disclose the confidential communication. However, the privilege can also be waived by disclosure or consent to disclosure. <p>If you think this privilege may apply, consultation with legal counsel is recommended.</p> | <p>Yes, there is a privilege that prohibits any clergyman (defined as a minister, priest, rabbi or Christian or Jewish minister or similar functionary) from disclosing any communication made to him or her by a person professing religious faith, seeking spiritual comfort or guidance, or seeking counseling. The reporting Statutes confirm that a member of the clergy (defined as a minister, priest, rabbi, imam, or similar functionary of a bona fide religious organization) is not required to report child abuse or disabled/elder abuse, if the clergy member learns of the abuse solely within the context of confession or other similar communication required to be kept confidential under church doctrine or practice. If the information is received in any other context or by a person who is not a member of the clergy, see above regarding who must and may report.</p> <p>If you think this privilege may apply, consultation with legal counsel is recommended.</p> |
| <p>How should I report it?</p> | <p>Immediately, to the central abuse hotline, via any of the following methods: Phone: 1-800-962-2873 (24 hours/7 days) Fax: 800-914-0004 Web-Based Report: http://www.myflfamilies.com/serviceprograms/abuse-hotline/report-online</p> | <p>Immediately (within 24 hours for child abuse) after there is reasonable cause to believe that abuse occurred, via any of the following methods:</p> <ul style="list-style-type: none"> • Child abuse: o Phone:1-855-422-4453 (24 hours/7 days) • Disabled/elder abuse: o Phone: 1-866-552-4464 (Mon-Fri 8 a.m.-5 p.m.) |
| | <p>If the child or vulnerable adult is in immediate danger, call 911.</p> | <ul style="list-style-type: none"> o Report online: https://aging.georgia.gov/report-elder-abuse <p>If the person is required to report as an employee or volunteer at a hospital, school, social agency or similar facility, he or she satisfies the duty to report by notifying the person in charge of the hospital, school, social agency or facility and that person must report as described above.</p> <p>If the child, disabled adult or elder person is in immediate danger, call 911.</p> |
| <p>What is the liability of the person making a report?</p> | <p>Any person making a report in good faith is immune from civil and criminal liability.</p> | <p>Any person or organization making a report in good faith, without a malicious purpose or participation in the crime, is immune from civil or criminal liability.</p> |
| <p>What are the consequences of failing to report?</p> | <p>Intentional failure to report, or intentional prevention of another person from reporting, is:</p> <ul style="list-style-type: none"> • A third degree felony, as to abuse, abandonment or neglect of a child. • A second degree misdemeanor, as to abuse, neglect, or financial exploitation of a vulnerable adult. | <p>Intentional failure to report child abuse or disabled/elder abuse by a person who is required to do so is a misdemeanor.</p> |

Appendix I

Florida Statutes on Reporting Child Abuse

ABUSE HOTLINE: **1-800-962-2873**

<http://www.myflfamilies.com/service-programs/abuse-hotline>

39.01 Definitions.—When used in this chapter, unless the context otherwise requires:

- (1) “Abandoned” or “abandonment” means a situation in which the parent or legal custodian of a child or, in the absence of a parent or legal custodian, the caregiver, while being able, has made no significant contribution to the child’s care and maintenance or has failed to establish or maintain a substantial and positive relationship with the child, or both. For purposes of this subsection, “establish or maintain a substantial and positive relationship” includes, but is not limited to, frequent and regular contact with the child through frequent and regular visitation or frequent and regular communication to or with the child, and the exercise of parental rights and responsibilities. Marginal efforts and incidental or token visits or communications are not sufficient to establish or maintain a substantial and positive relationship with a child. A man’s acknowledgment of paternity of the child does not limit the period of time considered in determining whether the child was abandoned. The term does not include a surrendered newborn infant as described in s. 383.50, a “child in need of services” as defined in chapter 984, or a “family in need of services” as defined in chapter 984. The absence of a parent, legal custodian, or caregiver responsible for a child’s welfare, who is a servicemember, by reason of deployment or anticipated deployment as defined in 50 U.S.C. s. 3938(e), may not be considered or used as a factor in determining abandonment. The incarceration, repeated incarceration, or extended incarceration of a parent, legal custodian, or caregiver responsible for a child’s welfare may support a finding of abandonment.
- (2) “Abuse” means any willful act or threatened act that results in any physical, mental, or sexual abuse, injury, or harm that causes or is likely to cause the child’s physical, mental, or emotional health to be significantly impaired. Abuse of a child includes the birth of a new child into a family during the course of an open dependency case when the parent or caregiver has been determined to lack the protective capacity to safely care for the children in the home and has not substantially complied with the case plan towards successful reunification or met the conditions for return of the children into the home. Abuse of a child includes acts or omissions. Corporal discipline of a child by a parent or legal custodian for disciplinary purposes does not in itself constitute abuse when it does not result in harm to the child.
- (3) “Addictions receiving facility” means a substance abuse service provider as defined in chapter 397.
- (4) “Adjudicatory hearing” means a hearing for the court to determine whether or not the facts support the allegations stated in the petition in dependency cases or in termination of parental rights cases.
- (5) “Adoption” means the act of creating the legal relationship between parent and child where it did not exist, thereby declaring the child to be legally the child of the adoptive parents and their heir at law, and entitled to all the rights and privileges and subject to all the obligations of a child born to the adoptive parents in lawful wedlock.
- (6) “Adult” means any natural person other than a child.

- (7) "Arbitration" means a process whereby a neutral third person or panel, called an arbitrator or an arbitration panel, considers the facts and arguments presented by the parties and renders a decision which may be binding or nonbinding.
- (8) "Authorized agent" or "designee" of the department means an employee, volunteer, or other person or agency determined by the state to be eligible for state-funded risk management coverage, which is assigned or designated by the department to perform duties or exercise powers under this chapter.
- (9) "Caregiver" means the parent, legal custodian, permanent guardian, adult household member, or other person responsible for a child's welfare as defined in subsection (54).
- (10) "Case plan" means a document, as described in s. 39.6011, prepared by the department with input from all parties. The case plan follows the child from the provision of voluntary services through any dependency, foster care, or termination of parental rights proceeding or related activity or process.
- (11) "Child" or "youth" means any unmarried person under the age of 18 years who has not been emancipated by order of the court.
- (12) "Child Protection Team" means a team of professionals established by the Department of Health to receive referrals from the protective investigators and protective supervision staff of the department and to provide specialized and supportive services to the program in processing child abuse, abandonment, or neglect cases. A Child Protection Team shall provide consultation to other programs of the department and other persons regarding child abuse, abandonment, or neglect cases.
- (13) "Child who has exhibited inappropriate sexual behavior" means a child who has been found by the department or the court to have committed an inappropriate sexual act.
- (14) "Child who is found to be dependent" means a child who, pursuant to this chapter, is found by the court:
- (a) To have been abandoned, abused, or neglected by the child's parent or parents or legal custodians;
 - (b) To have been surrendered to the department, the former Department of Health and Rehabilitative Services, or a licensed child-placing agency for purpose of adoption;
 - (c) To have been voluntarily placed with a licensed child-caring agency, a licensed child-placing agency, an adult relative, the department, or the former Department of Health and Rehabilitative Services, after which placement, under the requirements of this chapter, a case plan has expired and the parent or parents or legal custodians have failed to substantially comply with the requirements of the plan;
 - (d) To have been voluntarily placed with a licensed child-placing agency for the purposes of subsequent adoption, and a parent or parents have signed a consent pursuant to the Florida Rules of Juvenile Procedure;
 - (e) To have no parent or legal custodians capable of providing supervision and care;
 - (f) To be at substantial risk of imminent abuse, abandonment, or neglect by the parent or parents or legal custodians; or
 - (g) To have been sexually exploited and to have no parent, legal custodian, or responsible adult relative currently known and capable of providing the necessary and appropriate supervision and care.
- (15) "Child support" means a court-ordered obligation, enforced under chapter 61 and ss. 409.2551-409.2597, for monetary support for the care, maintenance, training, and education of a child.
- (16) "Circuit" means any of the 20 judicial circuits as set forth in s. 26.021.
- (17) "Comprehensive assessment" or "assessment" means the gathering of information for the evaluation of a child's and caregiver's physical, psychiatric, psychological, or mental

health; developmental delays or challenges; and educational, vocational, and social condition and family environment as they relate to the child's and caregiver's need for rehabilitative and treatment services, including substance abuse treatment services, mental health services, developmental services, literacy services, medical services, family services, and other specialized services, as appropriate.

(18) "Concurrent planning" means establishing a permanency goal in a case plan that uses reasonable efforts to reunify the child with the parent, while at the same time establishing another goal that must be one of the following options:

- (a) Adoption when a petition for termination of parental rights has been filed or will be filed;
- (b) Permanent guardianship of a dependent child under s. 39.6221;
- (c) Permanent placement with a fit and willing relative under s. 39.6231; or
- (d) Placement in another planned permanent living arrangement under s. 39.6241.

(19) "Court," unless otherwise expressly stated, means the circuit court assigned to exercise jurisdiction under this chapter.

(20) "Department" means the Department of Children and Families.

(21) "Diligent efforts by a parent" means a course of conduct which results in a meaningful change in the behavior of a parent that reduces risk to the child in the child's home to the extent that the child may be safely placed permanently back in the home as set forth in the case plan.

(22) "Diligent efforts of social service agency" means reasonable efforts to provide social services or reunification services made by any social service agency that is a party to a case plan.

(23) "Diligent search" means the efforts of a social service agency to locate a parent or prospective parent whose identity or location is unknown, initiated as soon as the social service agency is made aware of the existence of such parent, with the search progress reported at each court hearing until the parent is either identified and located or the court excuses further search.

(24) "Disposition hearing" means a hearing in which the court determines the most appropriate protections, services, and placement for the child in dependency cases.

(25) "Expedited termination of parental rights" means proceedings wherein a case plan with the goal of reunification is not being offered.

(26) "False report" means a report of abuse, neglect, or abandonment of a child to the central abuse hotline, which report is maliciously made for the purpose of:

- (a) Harassing, embarrassing, or harming another person;
- (b) Personal financial gain for the reporting person;
- (c) Acquiring custody of a child; or
- (d) Personal benefit for the reporting person in any other private dispute involving a child.

The term "false report" does not include a report of abuse, neglect, or abandonment of a child made in good faith to the central abuse hotline.

(27) "Family" means a collective body of persons, consisting of a child and a parent, legal custodian, or adult relative, in which:

- (a) The persons reside in the same house or living unit; or
- (b) The parent, legal custodian, or adult relative has a legal responsibility by blood, marriage, or court order to support or care for the child.

(28) "Fictive kin" means a person unrelated by birth, marriage, or adoption who has an emotionally significant relationship, which possesses the characteristics of a family relationship, to a child.

(29) "Foster care" means care provided a child in a foster family or boarding home, group home, agency boarding home, child care institution, or any combination thereof.

(30) "Guardian" means a relative, nonrelative, next of kin, or fictive kin who is awarded physical custody of a child in a proceeding brought pursuant to this chapter.

(31) "Guardianship assistance payment" means a monthly cash payment made by the department to a guardian on behalf of an eligible child or young adult.

(32) "Guardianship Assistance Program" means a program that provides benefits to a child's guardian on behalf of the child. Benefits may be in the form of a guardianship assistance payment, a guardianship nonrecurring payment, or Medicaid coverage.

(33) "Guardianship nonrecurring payment" means a one-time payment of up to \$2,000 made by the department to a guardian to assist with the expenses associated with obtaining legal guardianship of a child who is eligible for the Guardianship Assistance Program pursuant to s. 39.6225.

(34) "Harm" to a child's health or welfare can occur when any person:

(a) Inflicts or allows to be inflicted upon the child physical, mental, or emotional injury. In determining whether harm has occurred, the following factors must be considered in evaluating any physical, mental, or emotional injury to a child: the age of the child; any prior history of injuries to the child; the location of the injury on the body of the child; the multiplicity of the injury; and the type of trauma inflicted. Such injury includes, but is not limited to:

1. Willful acts that produce the following specific injuries:

- a. Sprains, dislocations, or cartilage damage.
- b. Bone or skull fractures.
- c. Brain or spinal cord damage.
- d. Intracranial hemorrhage or injury to other internal organs.
- e. Asphyxiation, suffocation, or drowning.
- f. Injury resulting from the use of a deadly weapon.
- g. Burns or scalding.
- h. Cuts, lacerations, punctures, or bites.
- i. Permanent or temporary disfigurement.
- j. Permanent or temporary loss or impairment of a body part or function.

As used in this subparagraph, the term "willful" refers to the intent to perform an action, not to the intent to achieve a result or to cause an injury.

2. Purposely giving a child poison, alcohol, drugs, or other substances that substantially affect the child's behavior, motor coordination, or judgment or that result in sickness or internal injury. For the purposes of this subparagraph, the term "drugs" means prescription drugs not prescribed for the child or not administered as prescribed, and controlled substances as outlined in Schedule I or Schedule II of s. 893.03.

3. Leaving a child without adult supervision or arrangement appropriate for the child's age or mental or physical condition, so that the child is unable to care for the child's own needs or another's basic needs or is unable to exercise good judgment in responding to any kind of physical or emotional crisis.

4. Inappropriate or excessively harsh disciplinary action that is likely to result in physical injury, mental injury as defined in this section, or emotional injury. The significance of any injury must be evaluated in light of the following factors: the age of the child; any prior history of injuries to the child; the location of the injury on the body of the child; the multiplicity of the injury; and the type of trauma inflicted. Corporal discipline may be considered excessive or abusive when it results in any of the following or other similar injuries:

- a. Sprains, dislocations, or cartilage damage.
- b. Bone or skull fractures.
- c. Brain or spinal cord damage.

- d. Intracranial hemorrhage or injury to other internal organs.
 - e. Asphyxiation, suffocation, or drowning.
 - f. Injury resulting from the use of a deadly weapon.
 - g. Burns or scalding.
 - h. Cuts, lacerations, punctures, or bites.
 - i. Permanent or temporary disfigurement.
 - j. Permanent or temporary loss or impairment of a body part or function.
 - k. Significant bruises or welts.
- (b) Commits, or allows to be committed, sexual battery, as defined in chapter 794, or lewd or lascivious acts, as defined in chapter 800, against the child.
- (c) Allows, encourages, or forces the sexual exploitation of a child, which includes allowing, encouraging, or forcing a child to:
1. Solicit for or engage in prostitution; or
 2. Engage in a sexual performance, as defined by chapter 827.
- (d) Exploits a child, or allows a child to be exploited, as provided in s. 450.151.
- (e) Abandons the child. Within the context of the definition of "harm," the term "abandoned the child" or "abandonment of the child" means a situation in which the parent or legal custodian of a child or, in the absence of a parent or legal custodian, the caregiver, while being able, has made no significant contribution to the child's care and maintenance or has failed to establish or maintain a substantial and positive relationship with the child, or both. For purposes of this paragraph, "establish or maintain a substantial and positive relationship" includes, but is not limited to, frequent and regular contact with the child through frequent and regular visitation or frequent and regular communication to or with the child, and the exercise of parental rights and responsibilities. Marginal efforts and incidental or token visits or communications are not sufficient to establish or maintain a substantial and positive relationship with a child. The term "abandoned" does not include a surrendered newborn infant as described in s. 383.50, a child in need of services as defined in chapter 984, or a family in need of services as defined in chapter 984. The incarceration, repeated incarceration, or extended incarceration of a parent, legal custodian, or caregiver responsible for a child's welfare may support a finding of abandonment.
- (f) Neglects the child. Within the context of the definition of "harm," the term "neglects the child" means that the parent or other person responsible for the child's welfare fails to supply the child with adequate food, clothing, shelter, or health care, although financially able to do so or although offered financial or other means to do so. However, a parent or legal custodian who, by reason of the legitimate practice of religious beliefs, does not provide specified medical treatment for a child may not be considered abusive or neglectful for that reason alone, but such an exception does not:
1. Eliminate the requirement that such a case be reported to the department;
 2. Prevent the department from investigating such a case; or
 3. Preclude a court from ordering, when the health of the child requires it, the provision of medical services by a physician, as defined in this section, or treatment by a duly accredited practitioner who relies solely on spiritual means for healing in accordance with the tenets and practices of a well-recognized church or religious organization.
- (g) Exposes a child to a controlled substance or alcohol. Exposure to a controlled substance or alcohol is established by:
1. A test, administered at birth, which indicated that the child's blood, urine, or meconium contained any amount of alcohol or a controlled substance or metabolites of such substances, the presence of which was not the result of medical treatment administered to the mother or the newborn infant; or

2. Evidence of extensive, abusive, and chronic use of a controlled substance or alcohol by a parent to the extent that the parent's ability to provide supervision and care for the child has been or is likely to be severely compromised.

As used in this paragraph, the term "controlled substance" means prescription drugs not prescribed for the parent or not administered as prescribed and controlled substances as outlined in Schedule I or Schedule II of s. 893.03.

(h) Uses mechanical devices, unreasonable restraints, or extended periods of isolation to control a child.

(i) Engages in violent behavior that demonstrates a wanton disregard for the presence of a child and could reasonably result in serious injury to the child.

(j) Negligently fails to protect a child in his or her care from inflicted physical, mental, or sexual injury caused by the acts of another.

(k) Has allowed a child's sibling to die as a result of abuse, abandonment, or neglect.

(l) Makes the child unavailable for the purpose of impeding or avoiding a protective investigation unless the court determines that the parent, legal custodian, or caregiver was fleeing from a situation involving domestic violence.

(35) "Impending danger" means a situation in which family behaviors, attitudes, motives, emotions, or situations pose a threat that may not be currently active but that can be anticipated to become active and to have severe effects on a child at any time.

(36) "Institutional child abuse or neglect" means situations of known or suspected child abuse or neglect in which the person allegedly perpetrating the child abuse or neglect is an employee of a public or private school, public or private day care center, residential home, institution, facility, or agency or any other person at such institution responsible for the child's welfare as defined in subsection (54).

(37) "Judge" means the circuit judge exercising jurisdiction pursuant to this chapter.

(38) "Juvenile sexual abuse" means any sexual behavior by a child which occurs without consent, without equality, or as a result of coercion. For purposes of this subsection, the following definitions apply:

(a) "Coercion" means the exploitation of authority or the use of bribes, threats of force, or intimidation to gain cooperation or compliance.

(b) "Consent" means an agreement, including all of the following:

1. Understanding what is proposed based on age, maturity, developmental level, functioning, and experience.
2. Knowledge of societal standards for what is being proposed.
3. Awareness of potential consequences and alternatives.
4. Assumption that agreement or disagreement will be accepted equally.
5. Voluntary decision.
6. Mental competence.

(c) "Equality" means two participants operating with the same level of power in a relationship, neither being controlled nor coerced by the other.

Juvenile sexual behavior ranges from noncontact sexual behavior such as making obscene phone calls, exhibitionism, voyeurism, and the showing or taking of lewd photographs to varying degrees of direct sexual contact, such as frottage, fondling, digital penetration, rape, fellatio, sodomy, and various other sexually aggressive acts.

(39) "Legal custody" means a legal status created by a court which vests in a custodian of the person or guardian, whether an agency or an individual, the right to have physical custody of the child and the right and duty to protect, nurture, guide, and discipline the child

and to provide him or her with food, shelter, education, and ordinary medical, dental, psychiatric, and psychological care.

(40) "Legal father" means a man married to the mother at the time of conception or birth of their child, unless paternity has been otherwise determined by a court of competent jurisdiction. If the mother was not married to a man at the time of birth or conception of the child, the term means a man named on the birth certificate of the child pursuant to s. 382.013(2), a man determined by a court order to be the father of the child, or a man determined to be the father of the child by the Department of Revenue as provided in s. 409.256.

(41) "Licensed child-caring agency" means a person, society, association, or agency licensed by the department to care for, receive, and board children.

(42) "Licensed child-placing agency" means a person, society, association, or institution licensed by the department to care for, receive, or board children and to place children in a licensed child-caring institution or a foster or adoptive home.

(43) "Licensed health care professional" means a physician licensed under chapter 458, an osteopathic physician licensed under chapter 459, a nurse licensed under part I of chapter 464, a physician assistant licensed under chapter 458 or chapter 459, or a dentist licensed under chapter 466.

(44) "Likely to injure oneself" means that, as evidenced by violent or other actively self-destructive behavior, it is more likely than not that within a 24-hour period the child will attempt to commit suicide or inflict serious bodily harm on himself or herself.

(45) "Likely to injure others" means that it is more likely than not that within a 24-hour period the child will inflict serious and unjustified bodily harm on another person.

(46) "Mediation" means a process whereby a neutral third person called a mediator acts to encourage and facilitate the resolution of a dispute between two or more parties. It is an informal and nonadversarial process with the objective of helping the disputing parties reach a mutually acceptable and voluntary agreement. The role of the mediator includes, but is not limited to, assisting the parties in identifying issues, fostering joint problem solving, and exploring settlement alternatives.

(47) "Medical neglect" means the failure to provide or the failure to allow needed care as recommended by a health care practitioner for a physical injury, illness, medical condition, or impairment, or the failure to seek timely and appropriate medical care for a serious health problem that a reasonable person would have recognized as requiring professional medical attention. Medical neglect does not occur if the parent or legal guardian of the child has made reasonable attempts to obtain necessary health care services or the immediate health condition giving rise to the allegation of neglect is a known and expected complication of the child's diagnosis or treatment and:

(a) The recommended care offers limited net benefit to the child and the morbidity or other side effects of the treatment may be considered to be greater than the anticipated benefit; or

(b) The parent or legal guardian received conflicting medical recommendations for treatment from multiple practitioners and did not follow all recommendations.

(48) "Mental injury" means an injury to the intellectual or psychological capacity of a child as evidenced by a discernible and substantial impairment in the ability to function within the normal range of performance and behavior.

(49) "Necessary medical treatment" means care which is necessary within a reasonable degree of medical certainty to prevent the deterioration of a child's condition or to alleviate immediate pain of a child.

(50) "Neglect" occurs when a child is deprived of, or is allowed to be deprived of, necessary food, clothing, shelter, or medical treatment or a child is permitted to live in an

environment when such deprivation or environment causes the child's physical, mental, or emotional health to be significantly impaired or to be in danger of being significantly impaired. The foregoing circumstances shall not be considered neglect if caused primarily by financial inability unless actual services for relief have been offered to and rejected by such person. A parent or legal custodian legitimately practicing religious beliefs in accordance with a recognized church or religious organization who thereby does not provide specific medical treatment for a child may not, for that reason alone, be considered a negligent parent or legal custodian; however, such an exception does not preclude a court from ordering the following services to be provided, when the health of the child so requires:

(a) Medical services from a licensed physician, dentist, optometrist, podiatric physician, or other qualified health care provider; or

(b) Treatment by a duly accredited practitioner who relies solely on spiritual means for healing in accordance with the tenets and practices of a well-recognized church or religious organization.

Neglect of a child includes acts or omissions.

(51) "Next of kin" means an adult relative of a child who is the child's brother, sister, grandparent, aunt, uncle, or first cousin.

(52) "Nonrelative" means a person unrelated by blood or marriage or a relative outside the fifth degree of consanguinity.

(53) "Office" means the Office of Adoption and Child Protection within the Executive Office of the Governor.

(54) "Other person responsible for a child's welfare" includes the child's legal guardian or foster parent; an employee of any school, public or private child day care center, residential home, institution, facility, or agency; a law enforcement officer employed in any facility, service, or program for children that is operated or contracted by the Department of Juvenile Justice; or any other person legally responsible for the child's welfare in a residential setting; and also includes an adult sitter or relative entrusted with a child's care. For the purpose of departmental investigative jurisdiction, this definition does not include the following persons when they are acting in an official capacity: law enforcement officers, except as otherwise provided in this subsection; employees of municipal or county detention facilities; or employees of the Department of Corrections.

(55) "Out-of-home" means a placement outside of the home of the parents or a parent.

(56) "Parent" means a woman who gives birth to a child and a man whose consent to the adoption of the child would be required under s. 63.062(1). The term "parent" also means legal father as defined in this section. If a child has been legally adopted, the term "parent" means the adoptive mother or father of the child. For purposes of this chapter only, when the phrase "parent or legal custodian" is used, it refers to rights or responsibilities of the parent and, only if there is no living parent with intact parental rights, to the rights or responsibilities of the legal custodian who has assumed the role of the parent. The term does not include an individual whose parental relationship to the child has been legally terminated, or an alleged or prospective parent, unless:

(a) The parental status falls within the terms of s. 39.503(1) or s. 63.062(1); or

(b) Parental status is applied for the purpose of determining whether the child has been abandoned.

(57) "Participant," for purposes of a shelter proceeding, dependency proceeding, or termination of parental rights proceeding, means any person who is not a party but who should receive notice of hearings involving the child, including the actual custodian of the child, the foster parents or the legal custodian of the child, identified prospective parents, and any other person whose participation may be in the best interest of the child. A

community-based agency under contract with the department to provide protective services may be designated as a participant at the discretion of the court. Participants may be granted leave by the court to be heard without the necessity of filing a motion to intervene.

(58) "Party" means the parent or parents of the child, the petitioner, the department, the guardian ad litem or the representative of the guardian ad litem program when the program has been appointed, and the child. The presence of the child may be excused by order of the court when presence would not be in the child's best interest. Notice to the child may be excused by order of the court when the age, capacity, or other condition of the child is such that the notice would be meaningless or detrimental to the child.

(59) "Permanency goal" means the living arrangement identified for the child to return to or identified as the permanent living arrangement of the child. The permanency goal is also the case plan goal. If concurrent case planning is being used, reunification may be pursued at the same time that another permanency goal is pursued.

(60) "Permanency plan" means the plan that establishes the placement intended to serve as the child's permanent home.

(61) "Permanent guardian" means the relative or other adult in a permanent guardianship of a dependent child under s. 39.6221.

(62) "Permanent guardianship of a dependent child" means a legal relationship that a court creates under s. 39.6221 between a child and a relative or other adult approved by the court which is intended to be permanent and self-sustaining through the transfer of parental rights with respect to the child relating to protection, education, care and control of the person, custody of the person, and decision-making on behalf of the child.

(63) "Physical injury" means death, permanent or temporary disfigurement, or impairment of any bodily part.

(64) "Physician" means any licensed physician, dentist, podiatric physician, or optometrist and includes any intern or resident.

(65) "Preliminary screening" means the gathering of preliminary information to be used in determining a child's need for further evaluation or assessment or for referral for other substance abuse services through means such as psychosocial interviews; urine and breathalyzer screenings; and reviews of available educational, delinquency, and dependency records of the child.

(66) "Present danger" means a significant and clearly observable family condition that is occurring at the current moment and is already endangering or threatening to endanger the child. Present danger threats are conspicuous and require that an immediate protective action be taken to ensure the child's safety.

(67) "Preventive services" means social services and other supportive and rehabilitative services provided to the parent or legal custodian of the child and to the child for the purpose of averting the removal of the child from the home or disruption of a family which will or could result in the placement of a child in foster care. Social services and other supportive and rehabilitative services shall promote the child's developmental needs and need for physical, mental, and emotional health and a safe, stable, living environment; shall promote family autonomy; and shall strengthen family life, whenever possible.

(68) "Prospective parent" means a person who claims to be, or has been identified as, a person who may be a mother or a father of a child.

(69) "Protective investigation" means the acceptance of a report alleging child abuse, abandonment, or neglect, as defined in this chapter, by the central abuse hotline or the acceptance of a report of other dependency by the department; the investigation of each report; the determination of whether action by the court is warranted; the determination of

the disposition of each report without court or public agency action when appropriate; and the referral of a child to another public or private agency when appropriate.

(70) "Protective investigator" means an authorized agent of the department who receives and investigates reports of child abuse, abandonment, or neglect; who, as a result of the investigation, may recommend that a dependency petition be filed for the child; and who performs other duties necessary to carry out the required actions of the protective investigation function.

(71) "Protective supervision" means a legal status in dependency cases which permits the child to remain safely in his or her own home or other nonlicensed placement under the supervision of an agent of the department and which must be reviewed by the court during the period of supervision.

(72) "Qualified professional" means a physician or a physician assistant licensed under chapter 458 or chapter 459; a psychiatrist licensed under chapter 458 or chapter 459; a psychologist as defined in s. 490.003(7) or a professional licensed under chapter 491; or a psychiatric nurse as defined in s. 394.455.

(73) "Relative" means a grandparent, great-grandparent, sibling, first cousin, aunt, uncle, great-aunt, great-uncle, niece, or nephew, whether related by the whole or half blood, by affinity, or by adoption. The term does not include a stepparent.

(74) "Reunification services" means social services and other supportive and rehabilitative services provided to the parent of the child, to the child, and, where appropriate, to the relative placement, nonrelative placement, or foster parents of the child, for the purpose of enabling a child who has been placed in out-of-home care to safely return to his or her parent at the earliest possible time. The health and safety of the child shall be the paramount goal of social services and other supportive and rehabilitative services. The services shall promote the child's need for physical, developmental, mental, and emotional health and a safe, stable, living environment; shall promote family autonomy; and shall strengthen family life, whenever possible.

(75) "Safety plan" means a plan created to control present or impending danger using the least intrusive means appropriate to protect a child when a parent, caregiver, or legal custodian is unavailable, unwilling, or unable to do so.

(76) "Secretary" means the Secretary of Children and Families.

(77) "Sexual abuse of a child" for purposes of finding a child to be dependent means one or more of the following acts:

(a) Any penetration, however slight, of the vagina or anal opening of one person by the penis of another person, whether or not there is the emission of semen.

(b) Any sexual contact between the genitals or anal opening of one person and the mouth or tongue of another person.

(c) Any intrusion by one person into the genitals or anal opening of another person, including the use of any object for this purpose, except that this does not include any act intended for a valid medical purpose.

(d) The intentional touching of the genitals or intimate parts, including the breasts, genital area, groin, inner thighs, and buttocks, or the clothing covering them, of either the child or the perpetrator, except that this does not include:

1. Any act which may reasonably be construed to be a normal caregiver responsibility, any interaction with, or affection for a child; or

2. Any act intended for a valid medical purpose.

(e) The intentional masturbation of the perpetrator's genitals in the presence of a child.

(f) The intentional exposure of the perpetrator's genitals in the presence of a child, or any other sexual act intentionally perpetrated in the presence of a child, if such exposure or

sexual act is for the purpose of sexual arousal or gratification, aggression, degradation, or other similar purpose.

(g) The sexual exploitation of a child, which includes the act of a child offering to engage in or engaging in prostitution, or the act of allowing, encouraging, or forcing a child to:

1. Solicit for or engage in prostitution;
2. Engage in a sexual performance, as defined by chapter 827; or
3. Participate in the trade of human trafficking as provided in s. 787.06(3)(g).

(78) "Shelter" means a placement with a relative or a nonrelative, or in a licensed home or facility, for the temporary care of a child who is alleged to be or who has been found to be dependent, pending court disposition before or after adjudication.

(79) "Shelter hearing" means a hearing in which the court determines whether probable cause exists to keep a child in shelter status pending further investigation of the case.

(80) "Sibling" means:

- (a) A child who shares a birth parent or legal parent with one or more other children; or
- (b) A child who has lived together in a family with one or more other children whom he or she identifies as siblings.

(81) "Social service agency" means the department, a licensed child-caring agency, or a licensed child-placing agency.

(82) "Social worker" means any person who has a bachelor's, master's, or doctoral degree in social work.

(83) "Substance abuse" means using, without medical reason, any psychoactive or mood-altering drug, including alcohol, in such a manner as to induce impairment resulting in dysfunctional social behavior.

(84) "Substantial compliance" means that the circumstances which caused the creation of the case plan have been significantly remedied to the extent that the well-being and safety of the child will not be endangered upon the child's remaining with or being returned to the child's parent.

(85) "Taken into custody" means the status of a child immediately when temporary physical control over the child is attained by a person authorized by law, pending the child's release or placement.

(86) "Temporary legal custody" means the relationship that a court creates between a child and an adult relative of the child, legal custodian, agency, or other person approved by the court until a more permanent arrangement is ordered. Temporary legal custody confers upon the custodian the right to have temporary physical custody of the child and the right and duty to protect, nurture, guide, and discipline the child and to provide the child with food, shelter, and education, and ordinary medical, dental, psychiatric, and psychological care, unless these rights and duties are otherwise enlarged or limited by the court order establishing the temporary legal custody relationship.

(87) "Victim" means any child who has sustained or is threatened with physical, mental, or emotional injury identified in a report involving child abuse, neglect, or abandonment, or child-on-child sexual abuse.

Appendix J



FIRST COUNSELING
BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

**Suicide and Threat of Harm to Others
Risk Assessment Interview Form**

Name: _____ Age: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

If a minor, name of parents: _____

Are the parents members of First Baptist Church? _____ Yes _____ No

Is the individual currently receiving counseling at First Counseling? _____ Yes _____ No

Is the individual receiving formal counseling outside First Counseling? _____ Yes _____ No

Is the individual a member of FBC? _____ Yes _____ No

If a minor, are the parents aware of the current situation? _____ Yes _____ No

Describe the general state of the individual during the meeting.

Describe the general counsel given to the individual.

1. THREAT OF SUICIDE

- a. Is the threat an old or new idea? When was it first mentioned?
- b. Has the counselee ever attempted suicide before?
- c. Does the counselee have a plan for how and when? Ask questions calmly. You will not plant ideas by asking questions.
- d. Does the counselee have the means to carry out his plan?
- e. What complicating issues are present (serious illness, divorce, pending legal action)?

2. THREAT OF HARM TO OTHERS

- a. Has the counselee threatened a specific person or target?
- b. Is the threat believable? You should consider if the threat is specific or vague. Does the counselee have a history of threats or violent behavior?

Appendix K

QUESTIONS AND ANSWERS ABOUT THE FLORIDA INVOLUNTARY COMMITMENT LAW - THE BAKER ACT

When a person is taken into custody under the mental health law in Florida and sent for an involuntary psychiatric examination it can be very scary for them and their friends and family. Commonly referred to as a "Baker Act" the initiation of an involuntary exam, what that means and what rights are accorded to a person is often not known and understood.

The information below is designed to help anyone better understand the process.

NOTE: The mental health law in Florida was amended in 2017 to offer better protection for minors and the flow chart has not yet been updated to reflect this change.

Question: How long may a person be held for involuntary examination, a Baker Act?

Answer: An adult may be held up to 72 hours for an involuntary examination. However the examination period for a minor, anyone 17 or younger, is 12 hours. Specifically the examination for a child "shall be initiated within 12 hours after the patient's arrival at the facility."

If the examination period for an adult or a minor has ended then one of the following actions must be taken:

1. The patient shall be released, unless he or she is charged with a crime, in which case the patient shall be returned to the custody of a law enforcement officer;
2. The patient shall be released for voluntary outpatient treatment;
3. The patient, unless he or she is charged with a crime, shall be asked to give express and informed consent to placement as a voluntary patient and, if such consent is given, the patient shall be admitted as a voluntary patient; or
4. A petition for involuntary services shall be filed in the circuit court if inpatient treatment is deemed necessary. This is the start of a possible involuntary psychiatric commitment.

NOTE: *You do not need to sign yourself in as voluntary in order to be discharged! If the examination period is over and you or your loved one do not want voluntary treatment then by law discharge is the next step unless a crime is involved.*

If the examination period ends on a weekend or a holiday than no later than the next working day the above must be done.

Question: When does a patient need to be examined by a health practitioner?

Answer: Florida Statute 394.459 **Rights of patients**, Section (2) **RIGHT TO TREATMENT**, Subsection (c) states:

“(c) Each person who remains at a receiving or treatment facility for more than 12 hours shall be given a physical examination by a health practitioner authorized by law to give such examinations, within 24 hours after arrival at such facility.”

It is important to understand that according to the Florida Administrative Code 65E-5.160 Right to Treatment that this examination must include a determination that abnormalities of thought, mood or behavior due to non-psychiatric causes have been ruled out.

“(3) The physical examination required to be provided to each person who remains at a receiving or treatment facility for more than 12 hours must include:

(a) A determination of whether the person is medically stable; and

(b) A determination that abnormalities of thought, mood, or behavior due to non-psychiatric causes have been ruled out.”

Question: Does a patient have a right to say what treatment they do or do not want to receive?

Answer: Florida Statute 394.459, **Rights of patients**, Section (2) **RIGHT TO TREATMENT**, Subsection (e) states:

“(e) Not more than 5 days after admission to a facility, each patient shall have and receive an individualized treatment plan in writing which the patient has had an opportunity to assist in preparing and to review prior to its implementation. The plan shall include a space for the patient’s comments.”

However, if you truly want to ensure that your wishes are respected, you should complete a Mental Health Advance Directive. This form can be downloaded from the Department of Children and Families at this link - [Mental Health Advance Directive](#). You may also be interested in attending one of our workshops on Mental Health Advance Directives. These workshops are delivered by an attorney and are free of charge. For more information please call 727-442-8820.

Question: What is Express and Informed Consent?

Answer: Florida Statute 394.459, **Rights of patients**, Section (3), **RIGHT TO EXPRESS AND INFORMED PATIENT CONSENT**, Subsection (a)2. states:

“2. Before giving express and informed consent, the following information shall be provided and explained in plain language to the patient, or to the patient’s guardian if the patient is 18 years of age or older and has been adjudicated incapacitated, or to the patient’s guardian advocate if the patient has been found to be incompetent to consent to treatment, or to both the patient and the guardian if the patient is a minor: the reason for admission or treatment;

the proposed treatment; the purpose of the treatment to be provided; the common risks, benefits, and side effects thereof; the specific dosage range for the medication, when applicable; alternative treatment modalities; the approximate length of care; the potential effects of stopping treatment; how treatment will be monitored; and that any consent given for treatment may be revoked orally or in writing before or during the treatment period by the patient or by a person who is legally authorized to make health care decisions on behalf of the patient.”

This simply means that a person, or the person’s guardian, is to be told, among other things:

- the reason for admission or treatment;
- the proposed treatment;
- the purpose of the treatment to be provided;
- **the common risks,**
- the benefits
- **the side effects**
- **alternative treatment;**
- the approximate length of care;
- the potential effects of stopping treatment;
- how treatment will be monitored;
- and that any **consent given for treatment may be revoked orally or in writing** before or during the treatment period by the patient or by a person who is legally authorized to make health care decisions on behalf of the patient

Question: Does a parent/guardian have the right to express and informed consent to treatment if a patient is a minor?

Answer: Yes. Florida Statute 394.459, **Rights of patients**, Section (3), **RIGHT TO EXPRESS AND INFORMED PATIENT CONSENT**, Subsection (a)1. states:

“(a)1. Each patient entering treatment shall be asked to give express and informed consent for admission or treatment. If the patient has been adjudicated incapacitated or found to be incompetent to consent to treatment, express and informed consent to treatment shall be sought instead from the patient’s guardian or guardian advocate. If the patient is a minor, express and informed consent for admission or treatment shall also be requested from the patient’s guardian. Express and informed consent for admission or treatment of a patient under 18 years of age shall be required from the patient’s guardian, unless the minor is seeking outpatient crisis intervention services under s. 394.4784. Express and informed consent for admission or treatment given by a patient who is under 18 years of age shall not be a condition of admission when the patient’s guardian gives express and informed consent for the patient’s admission pursuant to s. 394.463 or s. 394.467.”

Question: Does a patient have the right to communicate to their attorney, family and/or report alleged abuse?

Answer: Yes, but there are restrictions.

The law covering this is Florida Statute 394.459, **Rights of patients**, Section (5) **COMMUNICATION, ABUSE REPORTING, AND VISITS**, Subsections (c), (d) and (e) and it can be found by clicking here.

In our viewpoint, the important points to know are that:

- A person does have the right to communicate freely and privately with persons outside the facility unless it is determined that such communication is likely to be harmful to the person or others
- A telephone that allows for free local calls and access to a long-distance service is to be made available as soon as reasonably possible
- The telephone shall be readily accessible to the patient and shall be placed so that the patient may use it to communicate privately and confidentially.
- Facility rules on the use of the telephone may not interfere with a patient's access to a telephone to report abuse
- Each patient shall be allowed to receive, send, and mail sealed, unopened correspondence No patient's incoming or outgoing correspondence shall be opened, delayed, held, or censored by the facility unless there is reason to believe that it contains items or substances which may be harmful to the patient or others
- Each facility must permit immediate access to any patient, subject to the patient's right to deny or withdraw consent at any time, by the patient's family members, guardian, guardian advocate, representative, Florida statewide or local advocacy council, or attorney, unless such access would be detrimental to the patient.

"If a patient's right to communicate or to receive visitors is restricted by the facility, written notice of such restriction and the reasons for the restriction shall be served on the patient, the patient's attorney, and the patient's guardian, guardian advocate, or representative; and such restriction shall be recorded on the patient's clinical record with the reasons therefor. The restriction of a patient's right to communicate or to receive visitors shall be reviewed at least every 7 days. The right to communicate or receive visitors shall not be restricted as a means of punishment."

- Each facility shall establish reasonable rules governing visitors, visiting hours, and the use of telephones by patients in the least restrictive possible manner.
- Patients shall have the right to contact and to receive communication from their attorneys at any reasonable time.
- **Each patient receiving mental health treatment in any facility shall have ready access to a telephone in order to report an alleged abuse.**
- The facility staff shall orally and in writing inform each patient of the procedure for reporting abuse and shall make every reasonable effort to present the information in a language the patient understands.
- A written copy of that procedure, including the telephone number of the central abuse hotline and reporting forms, shall be posted in plain view.

Question: Does the family or Representative of a patient, who was sent for involuntary examination have to be notified?

Answer: Yes, according to Florida Statute 394.4599 Notice, a facility is required to give prompt notice of the whereabouts of an adult who is being involuntarily held for examination to the individual's guardian, guardian advocate, health care surrogate or proxy, attorney or representative, by telephone or in person within 24 hours after the individual's arrival at the facility. These contact attempts are to be documented in the individual's clinical record and begun as soon as reasonably possible after the individual's arrival.

In the case of a child, a facility is required to give notice of the whereabouts of a minor who is being involuntarily held for examination to the minor's parent, guardian, caregiver, or guardian advocate, in person or by telephone or other form of electronic communication, immediately after the minor's arrival at the facility.

However, the facility may delay notification for no more than 24 hours after the minor's arrival if the facility has submitted a report to the central abuse hotline based upon knowledge or suspicion of abuse, abandonment, or neglect and if the facility deems a delay in notification to be in the minor's best interest.

Question: What are the criteria used for involuntary examination, a Baker Act?

Answer: Florida Statute 394.463, Involuntary examination, states:

(1)

CRITERIA.—A person may be taken to a receiving facility for involuntary examination if there is reason to believe that the person has a mental illness and because of his or her mental illness:

(a)1. The person has refused voluntary examination after conscientious explanation and disclosure of the purpose of the examination; or

2. The person is unable to determine for himself or herself whether examination is necessary; and

(b)1.

Without care or treatment, the person is likely to suffer from neglect or refuse to care for himself or herself; such neglect or refusal poses a real and present threat of substantial harm to his or her well-being; and it is not apparent that such harm may be avoided through the help of willing family members or friends or the provision of other services; or

2. There is a substantial likelihood that without care or treatment the person will cause serious bodily harm to himself or herself or others in the near future, as evidenced by recent behavior.

Emphasis has been added to show the key parts of these criteria.

Appendix L

ACBC Standards of Conduct

The Preamble

The Scriptures of the Old and New Testament exert a controlling authority on both the terms and the content of counseling. Counseling is a relationship where the counselor moves toward troubled people to help with struggles faced in a fallen world. Holy Scripture possesses an authoritative role in controlling those relationships whether they happen in a formal counseling context or informally through living life together. The same Scriptures also claim to address directly the problems, questions, trouble, and struggles that people confront when they seek counseling help. The Association of Certified Biblical Counselors exists to help the church of Jesus Christ excel in the ministry of biblical counseling. We are bound by God's Word in the 66 books of the Bible as our standard for counseling practice. We affirm the following commitments as a summary of the terms by which we should order all of our counseling relationships. These are the standards of counseling conduct we shall use to evaluate the faithfulness of counselors certified with our organization.

I. The Commitment to Scripture

God inspired the Bible to provide authoritative guidance to his people as they honor him in the midst of difficulties in a sinful world. People seek counseling help when life does not seem to be working properly and they need help understanding and addressing what has gone wrong. Biblical counselors believe it is the divine intention of Scripture to describe the perfect standard to which people must conform as they live their lives, the spiritual problems they face in life which challenge that standard, and the process of transformation that God has designed to help them change. Biblical counselors are committed to using the Scriptures in counseling out of the conviction that the topics addressed in the Scriptures are the exact issues addressed in counseling conversations.

A. Biblical counselors must use the Scriptures in counseling as the authoritative and sufficient source for counseling content. The Scriptures sufficiently address the issues that trouble people and lead them to seek counseling help. This fact encourages biblical counselors that a proper understanding of the counseling problems of people combined with a proper understanding of the contents of Scripture lead to the confidence that the biblical text powerfully and relevantly addresses all counseling problems. This truth requires biblical counselors to work to direct all of our counseling conversations to the truths in God's Word, and to encourage our counselees to make much use of the Scriptures in their personal lives.

B. Biblical counselors must reject any secular counseling intervention that is at odds with Scripture. Secular counseling therapies add nothing essential to the understanding and resolution of counseling problems, though secular institutions can provide assistance to biblical counselors when situations like hospitalization become necessary for extreme and urgent care. Such interventions are only effective when they are consistent with Scripture and ineffective when they are at odds with Scripture. In themselves they are unnecessary and insufficient for the counseling needs that people face. Biblical counselors do not engage in these interventions or make referrals to counselors that do.

C. Biblical counselors must properly interpret the texts of Scripture that they use in their counseling. The meaning of a text of Scripture is controlled by its genre and by the grammatical and historical context in which it was written and by the intention of the author who penned it. Biblical counselors must seek to understand the genre and original meaning of the text of Scripture. Only with that understanding is it possible to communicate the truth of God's Word to counselees.

D. Biblical counselors must make a distinction between the clear meaning of a biblical text and their opinions and applications they derive from that text. There is an important distinction to be made between the author's intended, authoritative meaning of the text and our application of that text. Biblical counselors, therefore, must make a clear distinction between the explanation of texts of Scripture and their individual opinions about how to apply that passage to counselees.

Psalm 19; 119:25, 40, 50, 105, 107; Proverbs 6:23; 10:17; Romans 15:4; 2 Timothy 2:15; 2 Timothy 3:1-17; 2 Peter 1:3-21

II. The Commitment to Jesus

Jesus Christ is the eternal Son of God who has come in the flesh to redeem fallen humanity from all the effects of the fall through his life, death, resurrection, and ascension to the throne at the right hand of the Father. He is the source of eternal joy and serves as the ultimate resolution for every counseling problem. He intends to do away with all counseling difficulties powerfully, though partially in this life, and then fully in the next. All people access these benefits through faith in him as they begin and continue to live the Christian life. It is the privilege of all Christians to use our conversations to direct all peoples to him at all times and in all places. Jesus is the goal of all our conversations, whether informal or formal.

A. Biblical counselors must point their counselees to the necessity of faith in Jesus Christ unto salvation. Because Jesus Christ serves as the personal solution to all of our counseling difficulties, the primary goal of every counselor should be to introduce counselees to a saving relationship with Jesus Christ. Faithful counselors will pray for wisdom about the best way to call their counselees to saving faith in Christ, knowing that it is only through a relationship with him that troubled people can know joy now and throughout eternity.

B. Biblical counselors must also point their counselees to the necessity of faith in Jesus Christ unto sanctification. Faith in Jesus Christ is essential, not only to enter the Christian life, but also to grow in holiness throughout life. Biblical counselors point their believing counselees to the person and work of Christ as that which makes it possible for them to live the life of faith as they await the fullness of their salvation at the last day.

Matthew 28:16-20; Acts 1:8; Romans 6:1-4; 10:8-13; 1 Corinthians 2:1-5; 2 Corinthians 3:18; 4:4-6; Ephesians 4:15

III. The Commitment to Care

The call to engage in counseling conversations is the call to love others well. Biblical counselors demonstrate the love of Christ through the counseling care that they offer to troubled people who seek their help. The counseling relationship is one of loving care, regardless of whether

that relationship happens in the context of more formal counseling, or is simply the care we express to others. Biblical counselors seek a posture of loving service in their conversations and avoid bringing harm into the lives of counselees.

A. Biblical counselors must care for counselees in sacrificing time for them. Scheduled appointments are often one practical way to ensure that counseling conversations occur, but a biblical commitment to care for others well can never be limited to formal counseling meetings. Counselees are our brothers and sisters in Christ; they are our lost friends, neighbors, and family members. Loving them well requires our service to them at times that may be inconvenient. Biblical counselors spend their energies to love and serve troubled people and never seek to limit their involvement in the life of a counselee to a specific meeting, but involve themselves in the lives of their counselees as much as is wise and possible. It may at times be wise to end a formal counseling relationship when counseling has become counterproductive to the counselee. When further meetings are no longer wise or possible, reasonable effort is made to connect a counselee with someone who will continue biblical care.

B. Biblical counselors must care for counselees by seeking to match their words of counseling wisdom with tangible acts of care. The Bible teaches that it is a sinful demonstration of lifeless faith to limit our counseling care to the words we speak, while avoiding acts of care. Biblical counselors seek to meet the physical and other practical needs of our counselees wherever possible.

C. Biblical counselors must care for counselees in making decisions about whether and how they charge fees for counseling. The Bible is clear that ministers of the gospel of Jesus are entitled to earn their living from the gospel. This principle can extend to biblical counselors who serve Christ in vocational ministry. At the same time, the Bible is clear that the gospel of Jesus Christ is a precious gift that should be offered without price, and that it may be necessary for ministers of Christ to selflessly serve those in their care. Biblical counselors, therefore, must seek to love their counselees in discerning whether to charge fees and how much to charge. Biblical counselors will communicate with their counselees early and clearly about any fees for counseling, will avoid exorbitant fees, and will do everything possible to avoid refusing care to those unable to pay. Biblical counselors will never limit their conversational care only to those who are able to compensate their counselors.

D. Biblical counselors must care for counselees in protecting the weak from harm. Counselees can be harmed by others and can inflict harm on themselves. Biblical counselors avoid sinful language and behavior that brings harm into the lives of their counselees. Biblical counselors understand that it is impossible to protect the weak from every danger in a fallen world and yet they endeavor to protect counselees from exposure to the harmful treatment of others through false teaching, unbiblical counseling, harsh speech, abusive treatment, and any other manifestation of sinful relationships. And they actively seek to protect counselees from harm through their own persistent sin.

Proverbs 3:27; Matthew 22:34-40; John 15:12-17; 1 Corinthians 9:1-18; 1 Corinthians 13:1-13; 1 Timothy 5:18; 1 Thessalonians 2:1-12; James 2:14-17; 1 John 2:7-11; 3:11-24

IV. The Commitment to the Church

The church is the body of Jesus Christ, whom he has purchased with his own blood, and has commissioned to advance his kingdom on earth. Because the church is the pillar and buttress of God's truth, it is indispensable in the ministry of counseling that seeks to communicate that truth. Biblical counselors do their work with the conviction that biblical change is ultimately impossible apart from the full ministry of the church.

A. Biblical counselors must be committed to the priority of the church in accomplishing their counseling ministry. Biblical counselors will place themselves under the leadership of a church and pursue the accountability of that leadership as it relates to their life, doctrine, and counseling practices.

B. Biblical counselors must pursue the closest possible connections between church accountability and the counseling centers where they serve. Whether the counseling ministry is formally part of the church or whether church leadership holds the center accountable through board involvement or personal accountability of individual counselors, biblical counselors know that the ultimate faithfulness of a counseling center is connected to its organizational proximity to Christ's body.

C. Biblical counselors must seek to involve their counselees in a faithful church. Counseling ultimately seeks, by divine grace, to aid counselees to conform their life to behavior that glorifies God. Biblical counselors understand Christians best grow in grace when they are actively involved in the church.

D. Biblical counselors must seek out, for themselves, and those they counsel, churches, which will faithfully discharge the command of Christ to show care through corrective church discipline. Such discipline is a central way that God cares for his flock, and protects the purity of the church.

Matthew 16:16-19; 18:15-20; Acts 2:42; 1 Corinthians 5:1-5; Ephesians 2:19-21; 1 Timothy 3:15; Titus 1:10; Hebrews 3:13; 10:25

V. The Commitment to Humanity

God made human beings in his very own image as the pinnacle of his creation and they are, therefore, invested with inestimable dignity. Biblical counseling engages these precious image bearers to show care to them according to the standards of God's Word. Biblical counselors work to show honor and care to human beings in every relevant way.

A. Biblical counselors must counsel in a way that protects life and honors the image of God in human beings. Biblical counselors never condone the taking of innocent life through murder believing acts such as abortion, selective reduction, euthanasia, and assisted suicide are sins that both hurt people and dishonor God. Biblical counselors use their conversations to point people away from such sinful activities and toward a protection of all human life.

B. Biblical counselors must counsel with an understanding of the importance of the heart. The Bible teaches that human beings are guided by the various motivations and desires of their hearts. The heart is the source of initiation for all activity, and is of crucial importance in the

counseling task. Biblical counselors seek to help struggling people change at a level of depth that flows from the inner person to the outer person.

C. Biblical counselors must do their work understanding the importance of care for the physical body. Human beings are whole persons, and so the physical body and the actions that result from it are of crucial importance in the counseling task. Biblical counselors will work to foster behaviors that are commanded by Scripture and eliminate behaviors that are forbidden. Biblical counselors will also work to emphasize proper care for the physical body including recognizing the importance of professional medical care for medical problems.

D. Biblical counselors must do their work understanding the importance of gender. God created the human race to exist in two equal genders of male and female. God has also commanded that those genders are called to function in different capacities in the contexts of the home, church, and society. The biblical instruction on gender means that, while men and women should disciple one another as they live out their daily Christian lives, women will strive to avoid formally counseling men since this generally requires the task of teaching men with authority which is forbidden by Scripture. Men will likewise be committed to ministry to women, but will strive to avoid ongoing, one-to-one counsel with women because of the biblical admonitions to stay above reproach and to avoid any hint of sin. Biblical counselors embrace the entirety of Scripture's teaching on gender and so work to help troubled people embrace their physical gender revealed at birth, and to function in ways that accurately represent that gender in the world, the church, and in the Christian home.

Genesis 1:26-27; Proverbs 4:23; 20:5; Mark 7:14-23; 1 Corinthians 6:19-20; 11:2-16; 2 Corinthians 4:16-5:4; Galatians 3:28; Ephesians 5:3, 22-33; Colossians 3:18-19; 1 Timothy 2:9-15; 5:22; Titus 1:6; James 1:19-27; 4:1-2

VI. The Commitment to Purity

God created sex to be enjoyed in the context of the marriage relationship between one man and one woman. All other sexual expressions constitute sexual immorality and are heinous sins, bringing pain into the lives of all who are engaged in them. Counselors have a biblical responsibility to foster sexual purity in their attitudes, actions, and speech.

A. Biblical counselors must seek sexual purity in every area of their lives. The Bible commands Christians to flee all forms of sexual immorality. Those committed to the ministry of the Word in counseling must avoid immorality in their personal interactions with others. Biblical counselors do not seek any sexual involvement outside the bonds of Christian marriage regardless of whether that involvement is improper sexual speech, acts of impurity that push the line toward sex, or overt sexual acts. Biblical counselors also fight for moral purity in their private moments when no other person is around understanding that all sexual immorality destroys counseling effectiveness by harming themselves and their counselees.

B. Biblical counselors must seek purity in their intentions with counselees. The Bible teaches that all sinful sexual behavior begins with sinful intentions of the heart. Biblical counselors fight by grace to defeat the lustful intentions of the heart. Counselors should seek accountability especially when grappling with sinful sexual desires.

C. Biblical counselors must encourage sexual purity in the lives of counselees. The Bible teaches that great pain and consequences come into the lives of those who are guilty of sexual transgression. Because this is true biblical counselors are committed to urging counselees to pursue biblical standards of purity in thought, word, and deed. Biblical counselors discourage any expression of sexuality outside the bonds of marriage including lust, pornography, adultery, fornication, and homosexuality.

Exodus 20:17; Proverbs 5; Matthew 5:27-32; Romans 13:13-14; 1 Corinthians 6:9-20; Ephesians 5:1-8; 1 Thessalonians 4:3-8; Hebrews 13:4; James 1:14-15

VII. The Commitment to Competency

The calling to be a biblical counselor involves more than a commitment to the sufficiency of Christ and his Word in helping people with their problems in living. It also involves a commitment to growing in the kind of wisdom and skill that produces counseling excellence. No counselor of the Word has arrived at a place of perfection, but biblical counselors work to achieve growing competency as they help struggling people.

A. Biblical counselors must pursue the necessary education, training, and experience required to do their work. The best biblical counselors have received quality instruction from wise teachers about how to counsel well, have been trained to develop excellent counseling skills, and have been supervised by mentors who know how to counsel with excellence. Those who want to pursue the highest standards of excellence will pursue as much of this equipping as possible whether through formal or informal means.

B. Biblical counselors must be committed to ongoing education and training to remain effective. New counselees always arrive with fresh problems, and counselors are in constant need to grow in wisdom and skill. Biblical counselors, therefore, never quit learning, but always seek to grow their base of knowledge concerning the truths of Scripture, information about the problems that people face, and the wisdom that comes through counseling. When a counseling problem falls outside their area of competency counselors are honest with counselees about their limitations and seek help from others with greater competency.

C. Biblical counselors must maintain a vibrant relationship with Jesus Christ in order to maintain the spiritual vitality necessary for the work of counseling. The Bible is clear that people always speak out of the overflow of resources stored in their heart. This reality means that biblical counselors can only offer truly biblical care as they are walking in close relationship with the Lord Jesus Christ and storing his words in their heart. It is a close relationship with Jesus, more than anything else, that ensures our competency as counselors. Biblical counselors fight for a dynamic relationship with Jesus through, among other means of grace, Bible-reading, prayer, corporate worship, and close personal accountability as a part of the body of Christ.

D. Biblical counselors must seek to gain as much information about the nature of the problems faced by their counselee in order to provide effective care. It is impossible to help troubled persons without extensive knowledge of the problem they are confronting. Biblical counselors are committed to learning as much about counselees and their problems in order to be able to offer the best possible care. Biblical counselors avoid the assumption that they understand the nature of a counseling problem before they have carefully investigated the matter.

Proverbs 18:13, 17; John 15:1-11; Matthew 12:33-37; Ephesians 3:14-21; 5:11; Colossians 1:9; 3:16; 1 Timothy 4:15; 2 Timothy 2:2, 15; James 1:19;

VIII. The Commitment to Methodology

Wise counseling requires a commitment to understanding and following the change process as it is revealed in Scripture. Counseling is about offering help to people as they make Spirit-initiated changes in their lives that honor him, and so biblical counselors must know that biblical process and be committed to following it if they are to succeed in their work of counseling. The Bible is a sufficient resource, which explains the processes necessary in the counseling relationship.

A. Biblical counselors must be committed to the truth that the fundamental key to the process of biblical counseling is the person and work of Jesus Christ. We point counselees to the person and work of Jesus Christ, and then teach them how to grow in his grace. Biblical counselors work to point all persons to repentance toward God and faith in Jesus Christ to find forgiveness for their sin and comfort in their pain.

B. Biblical counselors must seek to help counselees change their sinful desires and behavior through a biblical process of putting off sinful attitudes and actions and putting on ones of righteousness. Change requires more than merely stopping sinful desires and behaviors, it also requires beginning new desires and behaviors which honor God. Biblical counselors work to help their counselees experience change in this practical way as informed by biblical texts.

C. Biblical counselors must seek to help counselees change at a level of depth through a biblical process of heart renewal. Because the desires of the inner man precede the behavior of the outer man the Bible requires that a person must take their thoughts captive in order to achieve the kind of change that honors God. Biblical counselors help counselees discover how their sinful desires, thoughts, and feelings lead to sinful actions and then work to assist them in forming new patterns of biblical thought and action through the grace of God.

D. Biblical counselors must help their counselees change by meeting with God in prayer. The Bible teaches the way we draw near to God in our sin and suffering is through consistent prayer. God hears the prayers of those who draw near to him in Christ, who desires to help them in time of need. Biblical counselors encourage their counselees to express their dependence on God through both public and private prayer.

Acts 26:17; Romans 12:2; 2 Corinthians 3:18, 10:5; Ephesians 4:17-32; Colossians 3:1-17; Hebrews 4:16

IX. The Commitment to Authority

The Bible is clear that God's world is one where structures of authority must be recognized and respected. The Bible teaches that authority exists between the Trinitarian relationships of the Godhead and affects each of our human relationships as well. Biblical counselors work to honor all biblically-instituted authorities and assist their counselees to do the same.

A. Biblical counselors must submit to the authority of God above every other authority source, and must help their counselees do the same. God is the supreme authority in the world, and is

himself the source of every human authority. God mediates his authority to us perfectly in the pages of his Word, the Bible. Every source of authority is ultimately held accountable to God's Word as the perfect standard. Biblical counselors help their counselees to live their lives in submission to God's authority even when his authority conflicts with human authorities. Such conflicts of human authority with divine authority can create very serious challenges to counselees suffering under the weight of an oppressive and unbiblical authority. Biblical counselors seek to help counselees work with other, more faithful sources of authority, to resolve oppression and abuse of authority.

B. Biblical counselors must help their counselees submit to legitimate authority in the context of the home. God has called husbands and fathers to exercise spiritual authority in the home, seeking the welfare of those in his care. God has also called wives to be submissive to their husbands and children to be submissive to the authority of their parents. These authority structures are an incredible blessing when discharged faithfully. Biblical counselors will help family members honor these sources of authority appropriately throughout the various stages of life.

C. Biblical counselors must help their counselees to submit to the authority of their church. God has gifted his church with ministers to shepherd the souls of his people. These shepherds have real spiritual authority that must be followed when it is discharged biblically. Biblical counselors see this authority as a blessing from God given for the good of his people, and therefore endeavor to help their counselees embrace it.

D. Biblical counselors must help their counselees submit to the authority of the state as it is discharged righteously. God has provided government as a blessing for all people in order to preserve order and righteousness. When this authority is discharged righteously and in keeping with God's law all people benefit from it. Wherever possible, biblical counselors work to obey the laws of the legal jurisdictions in which they serve, and urge their counselees to do the same.

Matthew 20:25-28; Acts 5:29; Romans 13:1-7; 1 Corinthians 10:31; 2 Corinthians 5:9; Ephesians 5:22-33; 6:1-4; Colossians 3:18-21; 1 Timothy 3:1-7; Hebrews 13:17; 1 Peter 2:13-25

X. The Commitment to Integrity

The Bible emphasizes the importance of honesty in all of our relationships. God never lies, and he commands this kind of integrity for his creatures as well. Honesty, therefore, is to be a hallmark of any human relationship including formal and informal counseling. The kind of trust necessitated in counseling relationship requires honesty on the part of counselors. Deceit sinfully undermines this relationship and must be avoided.

A. Biblical counselors must be straightforward about the kind of counseling they do. Counselees are served when biblical counselors clearly communicate their intention to use the Bible as their authority for all counseling matters. Biblical counselors should therefore seek to communicate this commitment in any context whether public or private, formal or informal.

B. Biblical counselors must maintain and communicate the biblical standards for confidentiality. Trust grows in relationships where all parties have clear expectations regarding

the confidential nature of private information. Biblical counselors seek to maintain trust and integrity by keeping personal information as private as possible. Biblical counselors protect the reputation of their counselees by avoiding reckless and unnecessary disclosures of personal information. Biblical counselors must also make clear to their counselees that a commitment to biblical authority requires the disclosure of certain kinds of information to certain parties. A biblical commitment to protect counselees from harm as well as commitments to the authority of the home, church, and or state may require disclosure of information that counselees would otherwise prefer to remain private.

C. Biblical counselors must accurately represent their qualifications. It demonstrates a lack of integrity for counselors to misrepresent their training, experience, and areas of expertise in communicating their counseling qualifications. Biblical counselors work to represent humbly and accurately their credentials, qualifications, and skill-level.

D. Biblical counselors must exercise care in receiving gifts from those they counsel. Such gifts may be gladly received when given as a token of love and gratitude for the help and care offered in counseling. Biblical counselors must be wary of gifts that are perceived as an exercise in manipulation or as an effort to control certain counseling outcomes. Biblical counselors never compromise their faithfulness to the Word of God because of a gift received or promised, monetary or otherwise.

Exodus 20:16; 23:1; Leviticus 19:11; Deuteronomy 16:19; Proverbs 19:5; 24:28; 25:18; Zechariah 8:16; Matthew 5:37; 2 Corinthians 4:2; Ephesians 4:25; Colossians 3:9

XI. The Commitment to Reconciliation

God is concerned to pursue peace with his creation. He possesses righteous anger regarding sin but offers to put that anger away through the death of Jesus Christ on the cross. He calls his followers to this same attitude of peace. The calling to be a biblical counselor is, therefore, the calling to be a peacemaker.

A. Biblical counselors must be committed to helping counselees pursue peace with God through faith and repentance. When biblical counselors are aware of areas in the lives of counselees where they are separated from God by their sin they will always seek, with wisdom and grace, to help them repent of that sin, confessing it to the Lord and forsaking it for the pursuit of new desires and behaviors that honor him.

B. Biblical counselors must be committed to helping counselees pursue peace in their relationships with other people through confession, forgiveness, and reconciliation. Biblical counselors take every available opportunity to help counselees achieve reconciliation in any relationship where this is possible, whether in marriage, family, friendships, or church fellowship. Though life in a fallen world often means that conflicts cannot be resolved, biblical counselors never allow a conflict to remain unresolved when another wise option remains available.

C. Biblical counselors must pursue peace in relationships with all their counselees. When a conflict arises biblical counselors will lead in reconciliation as each party confesses sin and grants forgiveness. Biblical counselors are also eager to bring in another party to help facilitate reconciliation if this should be necessary.

Psalms 32:1-5; Proverbs 28:13; Matthew 5:9; 23-24; 6:14; 7:1-5; 18:15-35; Mark 11:25; Luke 17:3; Galatians 6:1; Ephesians 4:31-32; Colossians 3:12-13; James 3:18; 1 John 1:8-9

XII. Violation of Standards

Members of the Association of Certified Biblical Counselors are required to observe these standards of conduct in order to remain members in good standing. It is the task of the board of trustees of this association to enforce these standards with our membership. As the board of trustees seeks to accomplish this responsibility they desire to honor the judgment of local ecclesiastical authorities whenever possible. Any verdict, however, about the violation of these standards for our members, or the penalties for violations of our members is at the sole discretion of the board of trustees. It shall be the responsibility of the board of trustees to clearly and publicly communicate the process for reporting violations of these standards, for investigating alleged violations, and for instituting penalties for any violations.

Appendix M

Rubric for Determining Level of Care

| Knowing Someone's SOS | | | | | | | | | |
|--|---|--|--|--------|---|---------|--|---------|---|
| Severity | 1 Wisdom Issue Mild Stress Everyday problems | 5 Moderate Conflict Distressed but Functional More complex issues | 10 Crisis Stronghold sin Significant suffering | | | | | | |
| Ownership | 1 Repentant Open Highly teachable | 5 Sees sin Makes excuses Moderately teachable | 10 Blame shifts Defensive Denial - Not teachable | | | | | | |
| Support | 1 Close to family Intimate & Accountable Vulnerable in small group | 5 Some family support Few friends Somewhat open in small group | 10 Estranged from family No friends Isolated - Not in small group | | | | | | |
| <p>Scores: To find the right score, add your severity, ownership, and support scores together.</p> <p>The following ranges will help you decide what to do next. Remember, you need to adjust responses on a case-by-case basis.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">3 - 15</td> <td>Care for in the group; possibly consult someone</td> </tr> <tr> <td>16 - 24</td> <td>Consult; possibly pastor over ministry for formal counseling</td> </tr> <tr> <td>25 - 30</td> <td>Refer to Pastor or a First Counseling counselor for formal counseling</td> </tr> </table> | | | | 3 - 15 | Care for in the group; possibly consult someone | 16 - 24 | Consult; possibly pastor over ministry for formal counseling | 25 - 30 | Refer to Pastor or a First Counseling counselor for formal counseling |
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| 16 - 24 | Consult; possibly pastor over ministry for formal counseling | | | | | | | | |
| 25 - 30 | Refer to Pastor or a First Counseling counselor for formal counseling | | | | | | | | |

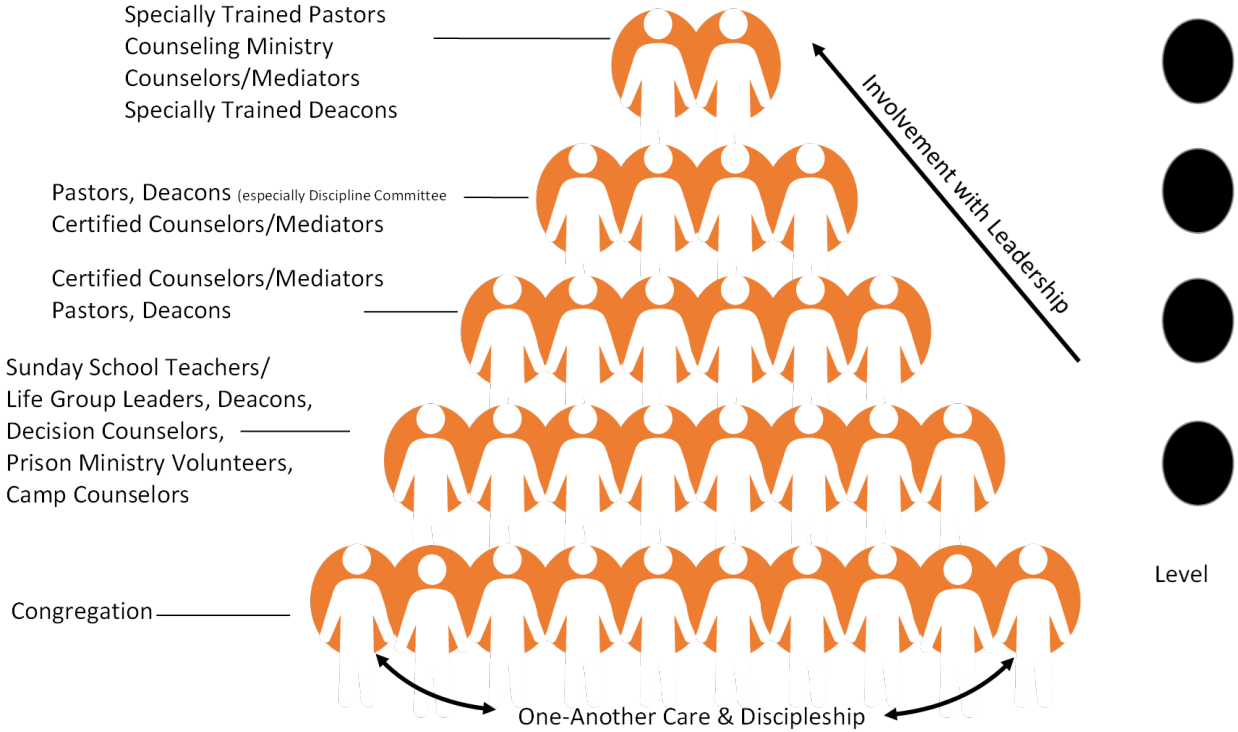
The S.O.S.

Total

1. Is a guideline; it takes discernment and practice.
2. Do not tell people you must do an SOS on them first.
3. Does not have to be an exact number. Give a range.

Appendix N

Model for Shepherding Care Genuine Care Triangle



Appendix O

Counseling Protocol and Procedures for Domestic Abuse

1. Often domestic abuse will initially present itself as a marriage counseling case. But, for any counseling where your counselee is married, be watching for red flags. In other words, any marriage case is a potential abuse case. A key red flag is anger issues.
2. As soon as you suspect abuse, please consult with your advisor to consider whether the counseling strategy needs to be changed to separate counseling instead of marriage counseling. If your advisor is not available, then consult with the Pastor of Counseling and Discipleship.
3. If domestic abuse is confirmed and there is imminent danger, call 911.
 - Physical assaults
 - If there are threatening verbal assaults like, "I am going to kill you," or, "You will be sorry if you tell anyone," please understand these also could justify a 911 call. Please remember our "counsel of three" procedure that is explained in the policy manual.
4. If domestic abuse is confirmed but there is not imminent danger, we would like you to call the Florida Domestic Violence Hotline, but you need informed consent from the abused spouse first. The Florida Domestic Violence Hotline number is 1-800-500-1119.
5. A call to DCF (1-800-962-2873) is necessary if children have ever witnessed violence but may also be necessary if there is a history of physical or verbal sin and children are in the home. If it was a verbal assault, then talk to your advisor and possibly use the "counsel of three" rule.
6. Get the facts. We need documentation for the sake of the counselee. This is necessary in case she needs help in a custody battle to protect the children. Facts are also necessary for lovingly confronting the abuser by the church as we follow the Matthew 18:15-17 process.
 - On this date, at this time, this, this and this occurred, and these people were present.
 - What has been the history? How long has this been going on? What have been other occurrences?
 - What led up to this?
7. Develop a safety plan with the abused. Please see the safety plan that is in our policy manual. Part of this safety plan, especially if there has been physical abuse, is getting the abused to a safe house. Duval County has Hubbard House as an option as well. Hubbard House may provide legal services pro bono.
8. When it becomes clear that you have a domestic abuse situation, please inform church security.
9. Contact whoever oversees counseling at your campus to arrange for a safe house. We have homes available for housing a single individual or also a mother with children. In addition, we have homes available on a moment's notice and also long-term up to two months. You will not be told who these loving individuals are or where the homes are located. It is imperative that these homes be kept on a strict need-to-know basis.



FIRST COUNSELING

BIBLICAL COUNSELING OF FIRST BAPTIST CHURCH JACKSONVILLE

DOMESTIC VIOLENCE PERSONALIZED SAFETY PLAN

Name: _____ Date: _____

The following steps represent my plan for increasing my safety and preparing in advance for the possibility for further violence. Although I do not have control over my partner's violence, I do have a choice about how to respond to my partner and how to best get myself and my children to safety.

STEP 1: Safety during a violence incident. *Men/women cannot always avoid violent incidents. In order to increase safety, battered partners may use a variety of strategies.*

I can use some of the following strategies:

- A. If I decide to leave, I will _____.
(Practice how to get out safely. What door, windows, elevators, stairwells, or fire escapes would you use?)
- B. I can keep my wallet/purse and car keys ready and put them (location) _____ in order to leave quickly.
- C. I can tell _____ about the violence and request that she or he call the police if she or he hears suspicious noises coming from my house.
- D. I can teach my children how to use the telephone to contact the police, the fire department, and 911.
- E. I will use _____ as my code with my children or my friends so they can call for help.
- F. If I have to leave my home, I will go to _____.
(Decide this even if you do not think there will be a next time.)
- G. I can also teach some of these strategies to some or all of my children.
- H. When I expect we are going to have an argument, I will try to move to a place that is low risk, such as _____. (Try to avoid arguments in the bathroom, garage, kitchen, near weapons, or in rooms without access to an outside door.)
- I. I will use my judgment and intuition. If the situation is very serious, I can give my partner what he/she wants to calm him/her down. I have to protect myself until I/we are out of danger.

STEP 2: Safety when preparing to leave. *Battered partners frequently leave the residence they share with their partner. Leaving must be done with a careful plan in order to increase*

safety. Batterers often strike back when they believe that the partner is leaving a relationship.

I can use some or all of the following strategies:

- A. I will leave money and an extra set of keys with _____ so I can leave quickly.
- B. I will keep copies of important documents or keys at _____.
- C. I will open a savings account by _____, to increase my independence.
- D. Other things I can do to increase my independence, include:

- E. I can buy a pre-paid cell phone for emergency use. I understand that if I use my cell phone, the following month's phone bill will show my partner the numbers I called after I left. To keep my phone communications confidential, I must use a pre-paid cell phone, or I might ask to use a friend's phone for a limited time when I first leave.
- F. I will check with _____ and _____ to see who would be able to let me stay with them or lend me some money.
- G. I can leave extra clothes or money with _____.
- H. I will sit down and review my safety plan every _____ in order to plan the safest way to leave the residence. _____ (domestic violence advocate or friend's name) has agreed to help me review this plan.
- I. I will rehearse my escape plan and, as appropriate, practice it with my children.

STEP 3: Safety in my own residence. *There are many things that a partner can do to increase his/her safety in his/her own residence. It may be impossible to do everything at once, but safety measures can be added step by step.*

Safety measures I can use:

- A. I can change the locks on my doors and windows as soon as possible.
- B. I can replace wooden doors with steel/metal doors.
- C. I can install security systems, including additional locks, window bars, poles to wedge against doors, an electronic system, etc.
- D. I can purchase rope ladders to be used for escape from second floor windows.
- E. I can install smoke detectors and fire extinguishers from each floor of my house/ apartment.
- F. I can install an outside lighting system that activates when a person is close to the house.
- G. I will teach my children how to call 911 in the event that my partner takes the children.

H. I will tell the people who take care of my children which people have permission to pick up my children and that my partner is not permitted to do so. The people I will inform about pick-up permission include:

- _____ (name of school)
- _____ (name of babysitter)
- _____ (name of teacher)
- _____ (name of Sunday School teacher)
- _____ (name[s] of others)

I. I can inform _____ (neighbor) and _____ (friend) that my partner no longer resides with me and that they should call law enforcement if he/she is observed near my residence. I can also instruct my children to go to this neighbor's home in case of an emergency.

STEP 4: Safety with an Order of Protection. *Many batterers obey protection orders, but one can never be sure which violent spouse will obey and which will violate protective orders. I recognize that I may need to ask law enforcement and the courts to enforce my protective order.* The following are some steps I can take to help the enforcement of my protection order:

- A. I will keep my protection order _____ (location). *Always keep it on or near your person. If you change wallets or purses, that is the first thing that should go into the new wallet/purse.*
- B. I will give my protection order to law enforcement departments in the community where I work, in those communities where I visit friends or family, and in the community where I live.
- C. There should be county and state registries of protection orders that all law enforcement departments can call to confirm a protection order. I can check to make sure that my order is on the registry. The telephone numbers for the county and state registries of protection orders are:

_____ (county) and _____ (state).
- D. I will inform my employer; my pastor, etc.; my closest friend; and _____ that I have a protection order in effect.
- E. If my partner destroys my protection order, I can get another copy from the clerk's office.
- F. If law enforcement does not help, I can contact an advocate or an attorney and file a complaint with the Chief of Police Department or the Sheriff.
- G. If my partner violates the protection order, I can call 911 or law enforcement and report the violation.

STEP 5: Safety on the job and in public. *Each battered spouse must decide if and when to tell others that his/her partner has battered him/her and that he/she may be at continued risk.*

Friends, family, and co-workers can help to protect the partner. Each partner should carefully consider which people to invite to help secure his/her safely.

I might do any or all of the following:

- A. I can inform my boss, the security supervisor, and _____ at work.
- B. I can ask _____ to help screen my telephone calls at work.
- C. When leaving work, I can _____.
- D. If I have a problem while driving home, I can _____.
- E. If I use public transit, I can _____.
- F. I will go to different grocery stores and shopping malls to conduct my business and shop at hours that are different from those I kept when residing with my partner.
- G. I can use a different bank and go at hours that are different from those I kept when residing with my partner.

STEP 6: Items to take when leaving. *When partners leave battering partners, it is important to take certain items. Beyond this, partners sometimes give an extra copy of papers and an extra set of clothing to a friend just in case they have to leave quickly.*

Money: Even if I never worked, I can take money from jointly held savings and checking accounts. If I do not take this money, he/she can legally take the money and close the accounts.

Items on the following lists with asterisks (*) are the most important to take. If there is time, the other items might be taken or stored outside the home. These items might best be placed in one location, so that if I have to leave in a hurry, I can grab them quickly. When I leave, I should take:

- * Identification for myself
- * My birth certificate
- * School and vaccination records
- * Checkbook, ATM card
- * Keys - house, car, office
- * Medications
- * Welfare identification, work permits, green cards
- * Children's birth certificates
- * Social Security cards
- * Money
- * Credit cards
- * Driver's license and registration
- * Copy of protection order
- * Passport(s), divorce papers
- * Medical records - for all family members
- * Lease/rental agreement, house deed, mortgage payment book
- * Bank books, insurance papers
- * Address book
- * Pictures, jewelry

- * Children's favorite toys and/or blankets
- * Items of special sentimental value

Telephone numbers I need to know:

Police/sheriff's department (local) - 911 or _____

Police/sheriff's department (work) _____

Police/sheriff's department (school) _____

Counselor or Pastor _____

Prosecutor's office _____

Battered women's program (local) _____

National Domestic Violence Hotline: 800-799-SAFE (7233)
800-787-3224 (TTY)
www.thehotline.org

County registry of protection orders _____

State registry of protection orders _____

Work number _____

Supervisor's home number _____

I will keep this document in a safe place and out of reach of my potential attacker.

Review date: _____

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