

CLIENT NAME _____
CLIENT NUMBER _____

Informed Consent Statement
By David Charles Preston, LCSW

Thank you for the opportunity to serve you as your counselor. The purpose of this Informed Consent Statement is to let you know about my educational and professional background, and to ensure that you understand our professional relationship. I am committed to providing you with high quality, professional counseling. Your questions and comments are extremely important to a positive outcome.

Education and Credentials

I received a Master of Social Work (MSW) degree from Marywood College in Scranton, Pennsylvania in May of 1996. Prior to beginning the Marywood Master of Social Work program in the fall of 1993, I had worked for 20 years as an engineer at IBM in the Endicott, New York manufacturing plant and Glendale Laboratory System Design Facility. Since receiving the MSW degree, I have held psychotherapist positions in a wide variety of inpatient and outpatient based programs.

From June of 1996 to February of 2002, I held the position of Senior Counselor at the Outpatient Counseling Program of Catholic Charities in Chenango County, New York. It was there that I gained education and experience in the treatment of sexual abuse and domestic violence.

From February 2002 to February of 2005, I provided initial psychiatric assessment, appropriate referral services and psychotherapy services to inmates at the Clinton County Jail as well as outpatients at the Clinton County Mental Health Clinic in Plattsburg, New York.

From February of 2005 to June of 2006, I held a position doing assessment and psychotherapy services with inmates at the Elmira, NY, Maximum Security Prison.

Most recently, from June 2006 to April of 2009, I held a position as Social Worker 2 in the State of New York, Hutchings Psychiatric Center in Syracuse. My work there was with the Seriously and Persistently Mentally Ill populations.

And finally, prior to moving to Florida to begin my position at Samaritan Gulf Coast, I had the privilege of working at The Samaritan Counseling Center of the Southern Tier in Endicott, New York.

I hold the following professional licensures and certifications:

- **Florida Licensed Clinical Social Worker, SW 9687**
- **New York State Licensed Clinical Social Worker, R054144**

I provide counseling and psychotherapy to individuals (including adolescents), couples and families. I help people experiencing problems and disorders to better understand their problems and disorders. I may help them to find more realistic ways of thinking that may be less emotionally painful. I may offer them ways to perceive their problems that are less debilitating and offer them a less emotional way of coping. . My services include counseling individuals who are experiencing depression, grief, marital discord and anxiety. I can be helpful to individuals and families that are suffering from substance abuse or addiction problems. I can work with people who are in the midst of crisis as well as those who struggle with ongoing concerns.. I can provide guidance to persons challenged by spiritual issues. I work with adolescents who have difficulty managing their behavior or emotions, coping with divorce, or experiencing school and/or social problems. I can help couples who are dissatisfied or have ongoing conflicts in their relationship to find mutually acceptable ways to reduce or eliminate their conflicts. As a faith based counselor, I am equipped and interested in integrating your spiritual values and beliefs into the counseling process to the extent you would like them to be.

My primary approach to counseling is to help people define and understand the thoughts and beliefs that are causing them emotional and or spiritual pain and unrest. Once defined, we can work together to find methods or ideas to relieve that pain or unrest.

I tend to use the Psychodynamic methods from Sigmund Freud and Richard Pearl to help people define their problems and possible causes. Reality therapy, Cognitive Behavioral Therapy, Rational Emotive Therapy, Cognitive Reconstructive Therapy and EMDR therapy are a few of my favorite frameworks for helping people to change their thinking to more realistic thoughts. We will work together to find the particular approach or approaches that will be most effective in attaining the goals we have established for our work together. It's important for us to work as a team. Your active involvement in the counseling process will be the most influential contribution to our success. Your input is essential in establishing treatment goals, defining issues to focus on, understanding any risks and benefits of possible change, defining the time commitment and financial costs that you can afford, as well as any other pertinent aspects of your situation. Periodically, we will evaluate your progress and, if necessary, redesign our treatment plan, goals, and/or methods.

It's important to remember that there are both benefits and risks associated with counseling. Risks might include experiencing uncomfortable levels of feelings like depression, sadness, guilt, anxiety, anger or frustration, or having difficulties with other people. Some changes may seem to worsen circumstances in the short run, but over time, with consistent responses, improvement should be experienced.

Confidentiality

I regard the information you share with me with the greatest of respect, so I want to be as clear as possible about how it will be handled. Generally, I will tell no one what you tell me. The privacy and confidentiality of our conversations, and my records, are your right

and are protected by state law and my profession's ethical principles, in all but a few circumstances. If for some reason there is a need to share information in your record, you will first be consulted and asked to sign a release of information form authorizing a transfer of information. The form will specify the information, which you give me permission to release to the other party, and will limit the time period during which the information may be released. You can revoke your permission at any time by simply giving me written notice. There are a few important circumstances in which I cannot guarantee confidentiality, legally and /or ethically:

- (1) When I believe you intend to harm yourself or another person.
- (2) When I believe a child or elder person has been or is in danger of being abused or neglected.
- (3) In rare circumstances, professional counselors can be ordered by a judge to release information.

Otherwise, I will not tell anyone anything about your treatment, diagnosis, history, or even that you are a client without your full knowledge and consent.

Explanation of Dual Relationships

Although our sessions may be very intimate psychologically and spiritually, it is important for you to be assured that we have a professional relationship rather than a social one. Our contact will be limited to sessions you will arrange with me. **Because I desire to respect your privacy, I will not speak to you in public, unless you speak first.** Because ours is a professional relationship I cannot accept gifts having monetary value.

Length of Sessions

I assure you that my services will be rendered in a professional manner consistent with accepted ethical standards. Sessions are 45-50 minutes in duration. We will schedule our sessions through our mutual agreement. **If you are unable to keep an appointment, please call my office (941-926-2959) to cancel or reschedule at least 24 hours in advance.** If I do not receive such advanced notice, unless you have an emergency, you are responsible for paying for the session that you missed. Please note that insurance companies do not pay for missed sessions, therefore you will be responsible for the entire fee.

Fees/Method of Payment

In return for a fee of \$115 for an initial session and \$100 for each subsequent session, I agree to provide counseling services for you. I would prefer that you pay at the conclusion of each session. Cash, personal checks or credit cards are acceptable for payment. I will provide you with a receipt for payment. If for financial reasons you are unable to pay the full fee, please request an "Application for Fee Subsidy" and return it with the requested information.

Billing/Insurance Reimbursement

If you wish to seek reimbursement for my services from your health insurance company, I will complete any reasonable forms related to your reimbursement provided by you or your insurance company. You will be expected to pay co-payments and /or deductibles at the time of your session. It is your responsibility to determine whether or not your insurance company will reimburse you and to what extent you will be reimbursed. It is important for you to know that you will be required to give me permission to share any information with your insurance company that they need to process your claim.

Telephone Availability

Being available to you in the case of an emergency is important to me. Because of this importance I carry a cell phone nearly all of the time. **My cell phone number is 941 224-6437.** In the event I do not answer the phone, please leave a message and I will make every reasonable effort to return your call within 24 hours. **If you or the situation will not allow waiting, crisis assistance can be obtained by calling the Bayside Center for Behavioral Health of Sarasota Memorial Hospital at 1-800-764-8477 or 917-7760. If for whatever reason these numbers are not in service, emergency assistance can be obtained 24 hours a day by calling 911.**

Vacation and Illness

I will, from time to time, be out of contact due to such things as continuing education seminars, vacations, family emergencies etc. Counseling is a uniquely personal service and therefore therapy may be briefly interrupted as opposed to asking you to meet with an unfamiliar therapist. I will attempt to give you adequate advanced notice when possible. **In the event that an emergency arises while I am unavailable please call Bayside Center for Behavioral Health of Sarasota Memorial Hospital at 1-800-764-8477 or 917-7760. If for some reason these numbers are not in service, emergency assistance can be obtained 24 hours a day by calling 911.**

Complaint Procedures

If you are dissatisfied with any aspect of my work, please inform me immediately. This will make our work together more efficient and effective. If you think you have been treated unfairly or unethically, by me or any other counselor, and cannot resolve the problem with me, you may contact Rev. Rick Howell, Executive Director of the Samaritan Counseling Services of the Gulf Coast at 321-2160, 3224 Bee Ridge Road, Sarasota, Florida 34239. You can lodge a complaint or receive clarification of your rights from Rev. Howell. Please sign and date both copies of this form. A copy for your records will be returned to you.

Client's Signature

David Preston's Signature

Date

