Dan Hicks, LPC Lasting Impact Counseling, LLC 143 SW Shevlin Hixon Drive, Ste #201 Bend, Oregon, 97702 714-222-4395c

# What is Counseling?

The process of counseling may include, but is not limited to:

Helping you to resolve personal issues
Education concerning the root of personal difficulties
Learning and applying new skills
Rejecting destructive ways of thinking and behaving

Gaining knowledge and insight concerning personal motivations

Working through issues of woundedness and unforgiveness

Learning to develop healthy relationships with yourself or others

Counseling may also incorporate the use of techniques from a variety of therapeutic approaches such as Insight Oriented, Object Relations, Cognitive Behavioral, Psycho educational, as well as the application of your personal faith principles.

No guarantee is made that the counseling you receive will effect the desired results. Individual success largely depends on the intentional application of the insights, skill and knowledge the client gains through the counseling process and their willingness to be active, open, honest and as consistent as possible with their therapist.

No one else can solve your problems for you, but through gaining knowledge, insight, understanding and wisdom you can experience increased success in your life and relationships.

## What your therapist expects from you: \_\_\_\_\_ (initial)

Express concerns, ask questions

Complete assignments

Come to counseling free from the influence of any substances

Pay your fees upon arriving to your session (have checks made out in advance)

Be on time for your appointments

Cancel 24 hours in advance (by phone or email) unless you have a serious illness or emergency

(No shows or cancellations made less than 24 hrs in advance are billed at the per session rate)

# What is counseling like?

A safe place where you will be accepted no matter what your struggle or difficulty

An opportunity to grow personally and spiritually

Personally challenging

Teaches responsibility for the things you have control over

Most sessions are 50 minutes in length

## What to expect from your therapist:

Return your calls within 24 hours in most cases

Continue to update skills and obtain ongoing training

Treat you with kindness and respect

Develop a plan with you to help you achieve your goals and objectives

Discuss discharge planning with you as soon as clinically appropriate

Seek confidential consultation with other professionals when appropriate

Help you to find an appropriate referral if necessary

#### Discharge and Termination (initial)

The client has the right to terminate the counseling relationship at any time. However, it is in the client's best interest to discuss and plan for discharge with your counselor.

sistently show for scheduled appointments. If there is a lapse in treatment for 1 month, unless arrangements have been made with your counselor, you will automatically be discharged from treatment. (initial if applicable) **Couples Therapy** Successful marriages are based on trust. Therefore openness and honesty is the best policy. For successful therapy there can be no secrets within couples counseling. However, sometimes there are issues that are disclosed during individual sessions that may be difficult for one spouse to disclose to the other. When that is the situation, you and your counselor will work together on the best way to share that information with your spouse. **Records and Confidentiality** (initial) The code of ethics for counselors and the state laws regulating most kinds of counseling consider personal information you discuss to be confidential. Except in a small number of situations, the helping professional may not reveal any information about you to another person without your explicit permission. Records of your treatment will be kept for seven years after your final session. One exceptions to this rule includes if your fees are paid by a third party such as an insurance company, certain details of your treatment (e.g. dates of treatment, diagnosis, symptoms, progress) may be required to be revealed in order to obtain reimbursement. Most insurance companies allow you to file claims directly with them so that your employer will not see the information. In cases where a court order has been issued and records have been subpoenaed the counselor has a legal responsibility to comply. Suicidality and Abuse (initial) Another exception where counselors are legally required to disregard confidentiality involves situations where there is a potential for suicide or homicide. For example, if you reveal information that indicates a clear danger of injury to yourself or others the counselor will need to contact the appropriate authorities or family members. Another exception to confidentiality is that all helping professionals are required by law to report any knowledge of abuse or neglect of a child or an incompetent or disabled person including suspected abuse. Your counselor will be happy to discuss any concerns you have about the protection of the information you provide. Fees and insurance reimbursement: (initial) Your insurance company may reimburse you for part of your fee; however it is your responsibility to pay your fee upfront unless other arrangements are made. If you cannot pay the full fee, please ask for a sliding scale fee evaluation form and submit it to your therapist. Your fee will not be changed until the form is fully filled out and returned to your therapist for evaluation. Your fee reduction is based on the information you have provided. If you are having difficulty keeping up with the charges please notify your counselor, and he/she will be glad to reevaluate at any time. Fees for court appearances, phone sessions, copies of records etc. will be discussed with you by your therapist as the need arises. Phone consults initiated by the client, that exceed 10 minutes will be billed in quarter hour increments based on the per session fee. (initial)

Counseling may be terminated for consistent failure to complete assignments, failure to pay fees, and failure to con-

By your signature below you are indicating that you have read and understood this Information and Consent Form and/or that any questions you have had about this statement have been answered to your satisfaction. Your signature also indicates that you are over 18 years of age and legally competent. If you are under 18 years of age you must

Your fee will be collected at the beginning of each session. Checks and cash are accepted. If you are going to use a check please have it ready when you come in to save time. For a small additional fee you can use your credit or

debit card and pay through Pay Pal. \$4.00 Additional charge per transaction.

(Client's signature/date)	(Parent/guardian's signature/date)
(Client's signature/date)	(Parent/guardian's signature/date)