



Informed Consent Statement
Richard O. Howell, Th.M., LMHC

Thank you for the opportunity to serve you as your counselor. This information is designed 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 quality, professional counseling, and your questions or comments are encouraged.

Education, Credentials and Experience

I received the Master of Theology in Psychology of Religion, Pastoral Care and Counseling degree from the Southern Baptist Theological Seminary in May 1990. Following the granting of my degree, I completed a two-year pastoral counseling residency at the School of Pastoral Care, North Carolina Baptist Hospitals, Incorporated. I also hold a Master of Divinity in Family Life Education degree from Southern Seminary. I have been a professional counselor since 1989. I was on the staff at the Pastoral Counseling Center of North Carolina Baptist Hospital prior to becoming executive director of the Samaritan Counseling Services of the Gulf Coast in 1999. I hold the following professional licensures and certifications:

- Florida Licensed Mental Health Counselor, #MH6032
- American Association of Pastoral Counselors, Fellow 3978
- Certified Cognitive Behavioral Therapist, #C18247
- American Association of Marital and Family Therapists, Clinical Member, #30759

Therapeutic Approach

I provide spiritually integrated counseling to individuals (including children and adolescents), couples and families. I serve people experiencing a variety of problems and challenges. My services include counseling individuals who are experiencing depression and grief related to an assortment of circumstances. I work with people who are in the midst of crisis as well as those who struggle with chronic concerns. Persons challenged by spiritual issues can find guidance. I work with children who have difficulty managing their behavior or emotions, coping with divorce, or experiencing school and/or social problems. I help couples who are dissatisfied or conflicted with their relationship. I also work with families who are seeking to make their home life more healthy and nurturing. I also serve individuals and families who are dealing with substance abuse issues. As a pastoral 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 relational and focused on solving problems and restoring health. I will seek to understand your concerns and to help you find effective responses to your challenges. My theoretical orientation includes a pastoral approach derived from the work of Wayne E. Oates, family systems principles primarily from the work of Murray Bowen, reality therapy of William Glasser, client-centered play therapy based on the work of Virginia Axline, and cognitive behavioral therapy.

I will employ the particular approach/approaches that I believe will be most effective in attaining the goals you and I have established for our work. It is important to realize that your active involvement in the counseling process will be the most influential contribution to success. Your input is essential in establishing treatment goals, focal issues, risks and benefits of change, the time commitment involved, costs, and other pertinent aspects of your situation. Periodically, we will evaluate your progress and, if necessary, redesign our treatment plan, goals, and/or methods.

As with any successful intervention, there are both benefits and risks associated with counseling. Risks might include experiencing uncomfortable levels of feelings like sadness, guilt, anxiety, anger or frustration, or having difficulties with other people. Some changes may seem to lead to worsening 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 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 privilege and are protected by state law and my profession's ethical principles, in all but a few circumstances. If 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, and it is revoked from that day forward.

There are the exceptions in which I cannot guarantee confidentiality, legally and/or ethically: (1) when I believe you intend to harm yourself or another person; and, (2) when I believe a child, elder person or vulnerable adult has been or is in danger of being abused or neglected. 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, including family members. Please be aware that Samaritan utilizes Quality Control Best Practices to ensure both confidentiality and service review.

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. I cannot accept friend requests for social media from clients. 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.

Cancellation Policy

We will schedule our sessions through our mutual agreement. **If you are unable to keep an appointment, please call my cell phone to cancel or reschedule at least 24 hours in advance. If I do not receive this advanced notice and you do not have an emergency, you are responsible for a \$75 no show or late cancelation fee. Please note that insurance companies, churches and Client Assistance Funds (CAF) do not pay for missed sessions, therefore you will be responsible for the \$75 fee.**

Length of Sessions

I assure you that my services will be rendered in a professional manner consistent with the highest ethical standards. Typically, sessions are 45 to 50 minutes in duration.

Emails and Text Messages

In order to protect your private health information in compliance with HIPPA, please **do not** email or text confidential information or details about therapy. Email and text will be limited to scheduling of appointments and forwarding resources as relevant. I am unable to provide therapy interventions or recommendations via email or text. If you have a question or comment in-between sessions, please call or reserve these notes for the next scheduled appointment.

Working with Minors and Parents

While privacy in psychotherapy is very important, particularly with adolescents, parental involvement is also essential to successful treatment and this may require that some information be shared with parents as it relates to helping the child or teen implement our interventions and if there is a risk or danger to the child or teen. Information shared will be at the discretion of the therapist based on protecting the therapeutic relationship with the child and teenager.

If you share legal custody parental consent from both parents is needed. Documentation to support parental custody and or signature of both parents may be requested.

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. Please be prepared to pay at each session with cash, personal check or credit card. Fees will be charged for bounced checks. I will provide a receipt for payment upon request. If for financial reasons, you are unable to pay the full fee, please request an "Application for Client Assistance" and return it with the requested information before your session. It is important that patient balances are paid to avoid interruption of services.

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/deductibles at the time of your session. **It is your responsibility to determine your insurance coverage.** As a courtesy, we are willing to file your insurance claim. 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.

Emergencies

If your situation is an emergency, you should call 911 at any time of day or night. In Sarasota, crisis assistance is available by calling or going to Bayside Center for Behavioral Health at 800-764-8477 or 941-917-7760 or Coastal Behavioral Healthcare's 24-hour Crisis Stabilization Unit at 941-364-9355. In Manatee County, you may call or go to Centerstone Emergency Psychiatric Center at 941-782-4617 or Suncoast Behavioral Health Center at 941-251-5000.

Telephone Availability

You may leave a non-emergency message on my cell phone at 941.321.3260 during my normal business hours, from 8AM to 5PM, Monday through Friday. I will make every reasonable effort to return your call within 24 hours. Please do not call me on holidays or weekends unless you need to leave a message to cancel an appointment.

Vacation and Illness

I will, from time to time, be out of contact due to such things as continuing education seminars, vacations, family emergencies and illness. If you want to meet with a therapist during my absence, arrangements may be made in advance or by calling the office at 941-926-2959. I will attempt to give you adequate advanced notice when possible. Please remember if an emergency arises to dial 911 or go to your nearest hospital emergency room.

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 this problem with me, you may contact the President of the Board of Directors of the Samaritan Counseling Services of the Gulf Coast, 3224 Bee Ridge Road, Sarasota, Florida 34239. With the President of the Board you can lodge a complaint or receive clarification of your rights. Please sign and date both copies of this form. A copy for your records will be returned to you.