

Informed Consent Statement Elizabeth Ibanez, PhD Licensed Clinical Psychologist FL PY7792

Thank you for the opportunity to serve you as your psychologist. 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

As a Clinical Psychologist, I provide mental health services to adults, adolescents, and children. These services include: individual and family (parent-child) and psychological evaluations and consultation. I am a Florida Licensed Psychologist (PY7792) since 2008. I earned a doctorate degree (PhD) in Clinical Psychology in 2007 from Texas Tech University, in Lubbock, Texas. I also earned a Master's degree in Psychology from Texas Tech University in 2003. Thus, I have 15 years of experience providing psychotherapy and assessments to children, teens, and adults. Prior to becoming licensed, I completed an American Psychological Association approved internship at Citrus Health Network, a community mental health center in Miami where I provided out-patient and in-patient psychological services. I completed post-doctoral training at Nova Southeastern University (NSU) in Ft. Lauderdale, FL under the School Psychology rotation where I completed psychoeducational evaluations and school consultations. Prior to joining Samaritan Counseling Services this past year, I worked for ten years in private practice, and taught psychology graduate level courses as an adjunct faculty member at Nova Southeastern University in Ft. Lauderdale. My professional experience and training includes providing psychological interventions with a variety of presenting problems including depression, anxiety, anger, stress, abuse victimization, trauma, grief, chronic illnesses, self-esteem, relationship problems, parenting, divorce, ADHD, learning problems, Autism Spectrum Disorders and developmental delays. I look forward to learning about your unique situation and helping you with your individual needs.

Therapeutic Orientation/Approach

Our initial visits will consist of gathering information about your background (e.g., family, social, medical, educational/occupational, etc.) and identifying strengths and obstacles that may be relevant to your presenting concerns and counseling. We will work together to identify biological, situational/environmental, and personality factors that may influence your current difficulties and symptoms and set clearly defined goals in order to develop interventions to help reach these goals. We will integrate approaches that best fit your needs and have an empirical basis to assist with managing your target goals. For example, we may utilize Cognitive-Behavioral interventions

which involve identifying connections between your thoughts, behaviors, and emotions and practice new patterns of thinking and behaving to alleviate emotional distress and negative reactions. We will integrate interpersonal therapy techniques to help you understands your ways of relating to others and identify healthy ways to interact with others as well as healthy reactions and perspectives for managing social, occupational, or family conflicts. We may also discuss developmental stages of life and gain better insight and knowledge of human development and adjustment to life stages and transitions. I am also able to integrate your faith and spirituality as part of the counseling process to the extent you desire. Ultimately, I aim to be respectful of your values, beliefs, and culture and provide culturally and spiritually sensitive services. I encourage you to discuss any relevant aspects of your culture and religious background that you would like us to take into consideration during the counseling process.

Client Involvement and Participation

It is important to realize that your active involvement in the counseling process will be the most influential contribution to your success. Your input is essential in establishing treatment goals, risks and benefits of change, the time commitment involved, and other pertinent aspects of your situation. Periodically, we will evaluate your progress and, if necessary, re-design your treatment plan, goals. Your commitment and active participation to this process is vital and includes consistent therapy attendance to scheduled appointments, reflecting on topics discussed in therapy, completing homework assignments as relevant, and actively participating in each session. Completing the symptom checklist that will be administered prior to sessions is essential to helping us have a measure of current concerns and address these accordingly as well as monitor your progress.

As with any intervention, there are both benefits and risks associated with psychotherapy. Risks may include experiencing uncomfortable levels of emotions and conflicts as we discuss painful experiences and exposure to negative emotions in an attempt to overcome these feelings. Some changes may lead to feeling worse in the short run, but with perseverance and consistency, the goal will be to decrease the frequency, intensity, and duration of discomfort and gain an improved sense of empowerment, knowledge, and coping skills to overcome difficult histories and better manage life challenges.

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. 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 several 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, elderly, or disabled person has been or is in danger of being abused or neglected; (3) if a judge subpoenas my records – a rare but possible circumstance if you are involved in or become involved in litigation; and (4) if I consult with another mental health professional regarding your case. Otherwise, I will not discuss your treatment, diagnosis, history or therapy attendance with family members or others without your knowledge and written consent. The American Psychological Association (APA) encourages psychologists to seek consultation when it is needed to ensure the objectivity and quality of the therapy. Such consultation is thematic in nature and no personal identifying information is used. 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 may not accept gifts having monetary value.

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 inbetween 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 <u>at the discretion of the therapist</u> 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.

Cancellation Policy

We will schedule our sessions through our mutual agreement. Please help me serve you better by keeping scheduled appointments. If you are unable to keep an appointment, please notify me at least 24 hours in advance to avoid a late cancel fee. To cancel and/or reschedule please call me at 941-702-4278 to reach me directly or to leave a voice mail message; or contact me by email at elizabeth@SamaritanGulfCoast.com. If I do not receive 24 hour 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 and are expected to be paid at the next appointment. This fee is collected to cover the overhead expenses and sustainability of Samaritan Counseling Services.

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.

Fees/Method of Payment

Payments of all fees, copays, and no-show/late cancel fees are due at the time of service. Please be prepared to pay at each session with cash, personal check (made out to Samaritan Counseling Services of the Gulf Coast) or credit card. Fees will be charged for bounced checks. I will provide a receipt for payment upon request.

<u>Self-pay</u> fees for psychotherapy are \$135 for the initial one hour session and \$130 for each subsequent 45-50 minutes session. It is important that patient balances be resolved prior to sessions in order to prevent interruption of services per SCSGC policies and procedures. Any requests for completion of paperwork such as FMLA documentation or disability documentations, record requests, letters, extended phone calls, and/or school consultations or observations may be subject to an additional fee as arranged by therapist.

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. All efforts will be made to obtained ahead of time insurance patient responsibility information; however, please note that these are estimates and may change based on your insurance claim processing results. 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. The client is responsible for any remaining balance after insurance processing or for claim denials or balances.

Emergencies

I do not provide emergency services. In case of an Emergency, you should call 911 at any time of day or night. Crisis assistance may be available via the following agencies: Sarasota County: the Bayside Center for Behavioral Health of at 941-917-7760, or Coastal Behavioral Healthcare's Crisis Stabilization Unit at 941-364-9355. If in Manatee County: Centerstone Hospital (941) 782-4617 at 2020 26th Ave E. Bradenton, FL Suncoast Behavioral Health Center at 941-251-5000. If for whatever reason these numbers are not in service, emergency assistance can be obtained 24 hours a day by calling 911.

Telephone Availability

As stated above, in compliance with HIPAA regulations, I cannot respond to email or text messages containing private information; if I receive such from you I will delete it without responding or acknowledging it. Please use electronic means of communication for appointment scheduling or changes only.

I can be reached by email at elizabeth@SamaritanGulfCoast.com, or you may use my direct number 941-702-4278 to arrange appointments and cancellation/reschedules. I will make every effort to return your call within 24 hours depending on office hours, with the exception of weekends and holidays.

Vacation and Illness

From time to time I will be out of contact due to such things as continuing education seminars, vacations, illness, family emergencies etc. Psychotherapy is a uniquely personal service and therefore therapy may be briefly interrupted. I will give you advance notice whenever possible. In the event that an emergency arises while I am unavailable, please follow the emergency procedures outlined above.

Complaint Procedures

If you are dissatisfied with any aspect of my work, please let me know immediately. I want to provide you with the best possible counseling services. 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 941-926-2959, 3224 Bee Ridge Road, Sarasota, Florida 34239. You can submit a complaint or receive clarification of your rights from Rev. Howell.