

Behavioral Healthcare of Fredericksburg, PLLC

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Debbie Jockin, LCSW

Informed Consent for Treatment

I look forward to working with you as we begin a collaborative relationship to accomplish your therapeutic goals. To maximize a successful outcome and to inform you on practice guidelines consistent with the NASW (National Association of Social Workers), which governs my standards of care, I have outlined the following expectations and information to hold both of us accountable.

Guiding Principles and Modalities

I typically implement short-term therapy, approximately 12-24 sessions over 4-6 months.

Sessions are weekly to begin and tapered as progress increases. My approach is client-centered, strengths-based, and systems oriented with primarily a cognitive-behavioral, psychodynamic, eclectic modality. The therapeutic alliance, consisting of rapport and mutual respect, is primary combined with an interactive, skills-focused, insight-based approach with activities in-between sessions to enhance skills acquisition.

Attendance Policy

I require at least 48 hours notice for a cancellation otherwise you will incur up to a \$50.00 fee that must be paid prior to rescheduling. I understand unforeseen circumstances sometimes occur, such as sickness, which will not count against you. If there are two or more Late Cancellations/No Shows or a lapse of at least one month without rescheduling I will suggest a referral to another therapist as this inconsistency in making appointments will decrease your ability to meet your goals and limit my effectiveness in doing therapy.

Confidentiality

Confidentiality is a cornerstone and defining principle of counseling. An atmosphere of emotional security, safety, and privacy is essential to maintaining a client-therapist alliance to effectively work through emotional distress and stressors. Thus minors as well as adults are afforded the rights of privacy to therapeutic content. The exceptions to this stipulation is when there are safety concerns such as self and other harm, the plan and intent to hurt self or others, or child/elder abuse. In addition, confidentiality can be breached for court mandated records or subpoena to appear in court. A Safety Contract will be implemented if the client reports thoughts of self-harm. If a Safety Contract has not been instituted and self or other harm is indicated go to the nearest emergency room or call 911 . Last, I do not take court-ordered cases.

By signing below you are endorsing that you have read and agree to the terms and conditions outlined above. I look forward to working with you.

Client Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Therapist Signature: _____

Date: _____