

SULLIVAN COUNSELING INC.

(516) 743-8571

Purpose of Disclosure Statement: This statement provides information about this counseling practice in order to help you in your efforts to choose a treatment approach that best suits your needs and explain your rights.

Credentials and Training: We are all licensed therapists in the State of New York. We will be happy to provide you with license numbers and other credentialing information at your request.

Approach to Therapy: Welcome to our counseling practice. We work with children, adolescence, couples and families. We will work with you and your family to access and build upon your inner strengths. Along the therapeutic process we will match the mode of therapy to your specific concern, need and preference. Everyone is different and unique in their own way. We work with you to tailor the counseling process and make it an enjoyable and effective experience. Some of our modalities include; CBT, Family Systems, Relational, Client Centered, Integrative, Solution Focused, Structural, Emotionally Focused and Psychodynamic.

Confidentiality: All of our discussions are confidential and we will disclose information regarding your participation in therapy only with your written permission/authorization or under the following conditions, as required by us by law:

- a medical emergency
- suspected child or elder abuse
- commission of or intent to commit a crime
- a complaint against me for unprofessional conduct
- subpoena, unless you file an objection within 14 days of the subpoena
- your written consent in the form of a Release of Confidential Information
- a threat to harm another person
- intent to commit suicide
- a court order

Confidentiality in Family Therapy: Parents and guardians have legal access to the therapy record of their children who are under 13 years of age. Each family member over the age of 13 has individual rights to confidentiality as outlined above when seen individually within the scope of family therapy.

Fees and Payment: Ordinarily, sessions are 45 minutes long, though some clients prefer longer sessions. Our rate is \$85 per 45 minute session. Payment is due at each session. If you require a reduced fee, we will discuss this when we begin working together. If your financial circumstances change during our work together, please let us know so that we can renegotiate your fee.

Appointments and Cancellation Policy: A full session fee is charged for missed appointments or cancellations with **less than 24 hours** notice, unless it is due to illness or an emergency. A bill will be mailed directly to all clients who do not show up for or cancel an appointment.

Your Rights: As a client receiving counseling services in the State of New York, you have the right to: 1) Choose the counselor and treatment approach that best suits your needs and purposes; 2) have full and complete knowledge of your counselor’s qualifications and training; 3) to obtain a copy of your counseling records within 30 days of your written request. Records are maintained by your therapist under conditions of security for 5 years from the start of therapy and 4) refuse treatment or discontinue treatment at any time.

Emergencies: If you are in a crisis, leave a message on our office cell number, 516-743-8571. However, if you don’t receive a call back from us immediately, call The Safe Center L.I at (516)-542-0404, LI Crisis Center at (516) 679-1111 or 911.

Client Consent to Counseling:

I have read and have been given a copy of the preceding disclosure statement. I understand the contents of this disclosure and my rights as a client. I authorize Sullivan Counseling Inc. to provide counseling services to me.

Client Name (Print)

Date

Client Name

Date

Clinician Name (Print)

Date

Clinician Name

Date