

George LeRoy, LCMHC, LCAS, CCS
Licensed Clinical Mental Health Counselor
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CLIENT DISCLOSURE STATEMENT
(Information and Consent)

I am pleased you have selected me as your counselor. This document is designed to inform you about my background and to ensure that you understand our professional relationship. I hold an Education Specialist Degree in Guidance and Counseling and a Master's of Arts Degree in Humanistic Psychology from State University of West Georgia. I have been employed in the Counseling field since January of 1976.

I have the following credentials:

North Carolina Licensed Clinical Mental Health Counselor (#4198)
North Carolina Licensed Clinical Addictions Specialist (#846)
North Carolina Addictions Fellow (2002- to Present)

COUNSELING SERVICES OFFERED/THEORETICAL APPROACHES

People can make better decisions if they have enough information and understand how something works. Here are some aspects of counseling and therapy as I see and practice it.

Counseling includes your active involvement and efforts to change your thoughts, feelings, and behaviors. Progress will require you to work both in and outside of the counseling sessions. There are no easy solutions to life's difficulties. I may ask you to do assignments, exercises, writing, journaling, or other projects. Most likely you will have to work on relationships and make long-term efforts. Sometimes change will be easy and swift, but more often it will be slow and deliberate. Progress may not be in a straight line and you may need to repeat your work in some areas. I believe growth is most often in an upward spiral.

I take an educative approach to people's problems and encourage you to learn more about the kind of work we will be engaged in.

If we work together we will need to specify the goals, methods, risks and benefits of treatments; the approximate time commitment involved. Before going further, I expect us to agree on a treatment plan to which we will both adhere. Periodically, we will evaluate our progress and, if necessary, redesign our treatment plan, goals, and methods.

As with any powerful intervention, there are both benefits and risks associated with counseling and therapy. Risks might include experiencing uncomfortable levels of feelings like sadness, guilt, anxiety, anger, or frustration. The risks may also include perceptions of increased difficulties with other people and with relationships. Some changes may lead to what seems to be worsening circumstances or even losses (for example, counseling will not necessarily keep a marriage intact).

Some clients that I work with are addicted to alcohol, drugs, food, or relationships and are seeking counseling for this issue; other clients are emotionally “healthy” and are experiencing difficulties with normal life events. I do not take on clients whom, in my professional opinion, I cannot help using the techniques and treatment methods that I have training and experience in applying to the counseling process. I will enter our relationship with optimism and an eagerness to help you. I have a special interest in working with clients undergoing life transitions, experiencing substance use disorders, or who are dealing with grief.

Please note that it is impossible to guarantee any specific results regarding your counseling goals, however, together we will work to achieve the best possible results for you.

CONFIDENTIALITY

I regard the information that you share with me with the greatest respect, so I want us to be as clear as possible about how it will be handled. Generally, I will tell no one what you tell me. I may discuss your case with other therapists on a need to know basis. The privacy and confidentiality of our conversations, and my records, is a privilege of yours and is protected by state law and my profession’s ethical principles, in all but a few circumstances. There are only two circumstances in which I cannot guarantee confidentiality, legally and/or ethically: (1) when I believe a child, elder person, and/or disabled person has been or will be abused or neglected; and (2) when I believe you intend to harm yourself or another person. 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 a signed Release of Information form.

EXPLANATION OF DUAL RELATIONSHIPS

Although our sessions may be very intimate psychologically, it is important for you to realize that we have a professional relationship rather than a social one. Our contact will be limited to sessions related to your treatment. Please do not invite me to social gatherings, offer me gifts, or ask me to relate to you in any way other than in the professional context of our counseling sessions. You will be best served while I am seeing you for counseling and therapy if our

relationship stays strictly professional and if our sessions concentrate exclusively on your issues. You will learn a great deal about me as we work together during your counseling experience, however, it is important for you to remember that you are experiencing me in my professional role.

LENGTH OF SESSIONS

I assure you that my services will be rendered in a professional manner consistent with accepted ethical standards. **Unless otherwise scheduled, individual sessions are fifty (50) minutes long.** We will schedule our sessions for our mutual needs and agreements. **If you are unable to keep an appointment, please call to cancel or reschedule at least 24 hours in advance.** If an appointment is missed without 24 hour notice a missed payment fee will be assessed. I will send appointment reminders 48 hours before your appointment. **Please initial beside various options** that I may use to contact you - Please note, I may use in person, phone, FaceTime, or Doxy.me to conduct your counseling sessions.

Email Mobile (cell) Home Phone Text Doxy.me FaceTime

If you are experiencing a mental health emergency, you may call Vaya Health Center's 24 hour 7 day a week 365 days a year to access services line 1 (800) 849-6127 or go to your nearest emergency room.

FEES/METHODS OF PAYMENT

My fees range from \$90 to \$120 per session. Payment for co-pays, deductibles, and private pay are due at the time of service by cash, check, Square, Apple Pay, or credit card. **Your signature below allows me to bill your insurance with your permission.** I offer a sliding fee scale based on ability to pay. In-network insurance can be filed with BCBSNC, Aetna, Cigna, Crescent, Medicare, Medicaid, Optum, United Behavioral Health, and Tricare.

CONSENT FOR SERVICES AND COMPLAINT PROCEDURES

If you are dissatisfied with any aspect of our work, please inform me immediately. This will make our work together more efficient and effective. If you think that you have been treated unfairly or unethically and you cannot resolve this problem with me, you can contact the North Carolina Board of Licensed Clinical Mental Health Counselors at ncblcmhc.org or my email at complaints@ncblcmhc.org Their phone number is (844) 622-3572. Contact them for clarification of client's rights as I have explained them, or to lodge a complaint.

Client's Signature _____ **Date** _____

Printed Name: _____