

Informed Consent for Psychotherapy

Counseling Connect, PLLC

www.counseling-connect.com

540-315-1445

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General Information. The therapeutic relationship is unique in that it is a highly personal and at the same time, a contractual agreement. Given this, it is important for us to reach a clear understanding about how our relationship will work, and what each of us can expect. This consent will provide a clear framework for our work together. Feel free to discuss any of this with me. Please read and indicate that you have reviewed this information and agree to it by filling in the checkbox at the end of this document.

In Case of Emergency. We do not provide on-call services and cannot promise that we will always be available to answer your calls. Please leave a message and we will get back you as soon as we can. You might expect some delays if you call over the weekend or during holidays.

Emergencies are urgent issues which require immediate attention. We will not be able to assist you with an after-hours emergency, but we can provide a list of agencies who will. If you are having a medical emergency, please dial 911. You could also use 211 to be connected with a trained professional in your area, who can connect you with resources and assistance for essential community services. If you're having a mental health crisis, please call Raft Crisis Hotline 540- 961-8400 or dial 988 for the National Suicide Prevention Hotline.

The Therapeutic Process. You have taken a very positive step by deciding to seek therapy. The outcome of your treatment depends largely on your willingness to engage in this process, which may, at times, result in considerable discomfort. Remembering unpleasant events and becoming aware of feelings attached to those events can bring on strong feelings of anger, depression, anxiety, etc. There are no miracle cures. I cannot promise that your behavior or circumstance will change. I can promise to support you and do my very best to understand you and repeating patterns, as well as to help you clarify what it is that you want for yourself.

Court proceedings. We will not testify in any court proceedings where a client and another party are involved, including but not limited to custody proceedings, divorce proceedings, or injuries. If you wish us to release any information about your therapy for the purpose of court, you will have to ask in writing and to expect up to 15 working days to process the documents.

Risks. Therapy is meant to result in positive change for the client. However, there are certain risks inherent to this process. It is possible that a client may learn things about themselves that they might not like or bring to the surface distressing memories. It is important to know that it is a natural part of the healing

process and sometimes, we feel worse before we feel better. Working through and confronting this issues can lead to growth and desired change.

If you are not making progress during the course of treatment, we have an ethical obligation to do no harm through our action or inaction. If there is a sustained lack of progress on treatment goals, then we may recommend that you transfer to a different therapist, seek additional professional help, or terminate your sessions.

Confidentiality. The session content and all relevant materials to the client's treatment will be held confidential unless the client requests in writing to have all or portions of such content released to a specifically named person/persons. Limitations of such client held privilege of confidentiality exist and are itemized below:

1. If a client threatens or attempts to commit suicide or otherwise conducts him/her self in a manner in which there is a substantial risk of incurring serious bodily harm.
2. If a client threatens grave bodily harm or death to another person.
3. If the therapist has a reasonable suspicion that a client or other named victim is the perpetrator, observer of, or actual victim of physical, emotional or sexual abuse of children under the age of 18 years.
4. Suspicions as stated above in the case of an elderly person who may be subjected to these abuses.
5. Suspected neglect of the parties named in items #3 and # 4.
6. If a court of law issues a legitimate subpoena for information stated on the subpoena.
7. If a client is in therapy or being treated by order of a court of law, or if information is obtained for the purpose of rendering an expert's report to an attorney.

Occasionally I may need to consult with other professionals in their areas of expertise in order to provide the best treatment for you. Information about you may be shared in this context without using your name.

If we see each other accidentally outside of the therapy office, I will not acknowledge you first. Your right to privacy and confidentiality is of the utmost importance to me, and I do not wish to jeopardize your privacy. However, if you acknowledge me first, I will be more than happy to speak briefly with you, but feel it appropriate not to engage in any lengthy discussions in public or outside of the therapy office.

Payment Information. Payment is due at the time of service. When paying by credit or debit card, you authorize Counseling Connect, PLLC to charge the credit/debit/health account that we have on file. If you do not show up for your appointment or cancel before 24 hours, your counselor will charge your card with a no show or late cancelation. If you are more than 15 minutes late, then it will be considered a no show. You will be billed for the full session charge (\$125 per service). If your card is declined and no payment has been made, then you will not be scheduled any new appointments until your balance is paid in full.

About the therapist. The education, experience, and qualifications of your therapist are contained in their Professional Disclosure Statement, which will be included in your intake packet.

BY CLICKING ON THE CHECKBOX BELOW I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT.