



# NIA COUNSELING & FAMILY SERVICES, PLLC

WHERE CULTURE, MEETS CARE



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## Counseling Contract

Welcome to my counseling services. This document and attachments constitute a contract between us (the "AGREEMENT") and you should read it carefully and raise any questions and concerns that you have before you sign it. The services to be provided by Kadijah Harris are teletherapy through a safe and secure video call platform. You will receive the link via email before session.

### Insurance and Fee's

Nia accepts insurance but offers a sliding fee scale that matches what clients are able to afford.

Fees for counseling sessions must be paid in advance before session is rendered unless an alternative arrangement is agreed to in writing.

### Cancellation Policy

Please try to give 24 hours notice if you need to cancel or change the time of an appointment. Ms. Harris agrees that every effort will be made to reschedule sessions which are canceled in a timely manner. If you are going to be late please let Ms. Harris know as soon as possible. If you are more than 15 minutes late without notice it will be considered a no-call, no-show, and a fee equal to half your session rate will be applied.

### Psychotherapy

I have my clinical social work license in North Carolina with training and experience in diagnosing and treating emotional problems. Psychotherapy is a health care service and is usually reimbursable through health insurance policies. Psychotherapy utilizes knowledge of human behavior, motivation and behavioral change, and interactive counseling techniques. The primary foci of psychotherapy are identification, diagnosis, and treatment of mental and nervous disorders.

The goals of psychotherapy include alleviating symptoms, understanding the underlying dynamics which create symptoms, changing dysfunctional behaviors which are the result of these disorders, and developing new strategies for successfully coping with the psychological challenges which we all face. Most research on psychotherapy outcomes indicates that the quality of the relationship is most closely correlated with therapeutic progress. Psychotherapy patients are often emotionally vulnerable. This vulnerability is increased by the expectation that they will discuss very intimate personal data and expose feelings about themselves about which they are understandably sensitive. The past life experiences of psychotherapy patients have often made trust difficult to achieve. These factors give psychotherapists greatly disproportionate power that creates a fiduciary responsibility to protect the safety of their clients and to "above all else, do no harm." It is important to understand that counseling is a professional relationship. While it may often feel like a close personal relationship, it is not one that can extend beyond professional boundaries both during and after our work together. Considerable experience shows that when boundaries blur, the hard won benefits gained from the therapeutic relationship are endangered.

### Confidentiality

As a social worker, I am ethically and legally bound to protect the confidentiality of our communications. I will only release information about our work to others with your written permission or in response to a court order. There are some situations in which I am legally obligated to breach confidentiality in order to protect you or others from harm. If I have information that indicates that a child or elderly or disabled person is being abused, I must report that to the appropriate state agency. If a client is an imminent risk to themselves or makes threats of imminent violence against another, I am required to take protective actions.

These situations are quite rare in counseling practices. If such a situation occurs in our relationship, I will make every effort to discuss it with you before taking any action. As you are no doubt aware, it is impossible to protect the confidentiality of information that is transmitted electronically. This is particularly true of e-mail and information stored on computers that are connected to the internet, which do not utilize encryption and other forms of security protection. Some sessions are conducted in a group format. By signing this agreement, you commit yourself to maintaining the confidentiality of all information communicated to you by other therapy clients and by your Therapist. We both understand that progress is often enhanced when clients are allowed to discuss their therapeutic relationship with trusted colleagues and friends. You can have these discussions but you must in no way share information that leads to the identification of others in the group. If you are ever in doubt regarding what to reveal and what not to reveal, err on the side of protecting the privacy of others, a vital and nonnegotiable element of such group interaction. Your signature below indicates that you have read the information in this document and agree to abide by its terms during our professional relationship.

### Code of Ethics and Complaints

I am fully licensed and work within the NASW Code of Ethics. This is to ensure that you receive a good service and means that I am accountable to a higher national organization and must work within their guidelines. They have their own complaint procedure, copies of this are available upon request.

CLIENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Regards,

A handwritten signature in black ink, appearing to read 'Kadijah H.', written in a cursive style.

**Kadijah Harris, LCSW**

Outpatient Therapist