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Licensed Marriage & Family Therapist #92784

#### INFORMED CONSENT FOR PSYCHOTHERAPY

Thank you for taking the time to review this document. Its intention is to provide you with important information about my private practice and the psychological services I provide. I hope you find it helpful and informative. Please know that you are welcome to ask me further questions should you need clarification.

# **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.

# THE THERAPEUTIC PROCESS

You have taken a very positive step by deciding to seek therapy. Psychotherapy includes risks and benefits. The outcome of your treatment depends largely on your willingness to engage in this process, which may, at times, result in considerable discomfort. A person may go through periods of therapy, which may result in emotional discomfort, changes in relationships, or temporary worsening of symptoms. Remembering unpleasant events and becoming aware of feelings attached to those events can bring on strong feelings of anger, depression, anxiety, etc. The goal is to have these issues subside as work progresses. Psychotherapy has been shown to be beneficial and effective. It can help reduce distress, increase your ability to handle difficult life circumstances, enhance your relationships, and improve your all around emotional, mental and spiritual well being, just to name a few. However, 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. If at any point during psychotherapy either of us assess that therapy is not effective in helping you reach your therapeutic goals, I am obligated to discuss it with you, and, if appropriate, terminate treatment. In such cases, I will refer you to other individuals or clinics that may be of help to you. Please note that you have the right to request changes in treatment, refuse treatment, or terminate services at any time. Initially when we meet, I will be evaluating your needs. Based on this evaluation, I will provide you with my initial impressions, which may include a diagnosis and treatment recommendations.

Generally, sessions are 50 minutes in length and scheduled for once a week. However, we may decide to meet more or less frequently.

## **PROFESSIONAL FEES**

Psychotherapy services are \$250 for a 50 minute session. You will be expected to pay prior to, or at the beginning of each session. Fees are subject to change with prior notice of at least 30 days. There may also be charges for telephone consultations, reports preparation, letters, and court testimony. These fees will be discussed with you in advance. There will be a 1% per month late charge for each month in the unlikely event of a balance due. If for some reason you find that you are unable to continue paying for your therapy, you should inform me. I will help you to consider any options that may be available to you at that time.

## **INSURANCE**

If you carry health insurance, upon request, I will provide you with a universal insurance form which I ask you to submit to your insurance company on your own. This in no way guarantees reimbursement to you from your insurance carrier. You can check with your insurance coverage. However, you will be personally responsible for full payment, regardless of whether your insurance pays or not. You are acknowledging that I am neither a Medicare/Medical provider, nor a member of any HMO or PPO insurance panel. Once we have information about your insurance coverage, and if you decide to submit your own form, we can discuss what we can attempt to accomplish given the benefits available to you and what will happen if your insurance benefits run out before you feel ready to stop therapy. Please note that you have the right to pay for services yourself and without involvement of your insurance company. Also note, submitting the universal insurance form to the insurance company will state you are seeking psychological services.

# APPOINTMENTS AND CANCELLATIONS

The scheduling of an appointment involves a set reservation of time specifically for you. Sessions are typically scheduled to occur one time per week at the same time and day if possible. Your consistent attendance greatly contributes to a successful outcome. If you are unable to attend your session, you will need to contact me NO LESS than 24 hours in advance in order to avoid a missed appointment fee. A MISSED APPOINTMENT FEE is 50% (\$125) of the full fee. The missed appointment fee will be payable prior to, or at the beginning of your next appointment. Insurance does not cover this expense. If you are unable to reach me immediately, please leave a message on my voicemail. If you are unable to contact me and it is an emergency, please hang up and dial 911 and/or go to the nearest emergency room.

The standard meeting time for psychotherapy is 50 minutes. It is up to you, however, to determine the length of time of your sessions. Requests to change the 50-minute session needs to be discussed with the therapist in order for time to be scheduled in advance. A \$10.00 service charge will be charged for any checks returned for any reason for special handling. If you are late for a session, you may lose some of that session time.

# **CONTACTING ME**

I am often not immediately available by telephone. When I am not available, my confidential voicemail will answer the call. I monitor missed calls frequently. Please know that my voicemail is NOT connected to a pager. I will make every effort to return your call on the same day, with the exception of weekends, holidays and times when I am out of town. If there is a true emergency, please call 911 and/or go to the nearest emergency room. If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact in case you urgently need to consult a psychotherapist.

# PROFESSIONAL RECORDS

The laws and standards of my profession require that I keep professional records. These records are maintained, under a lock and key, for a minimum of seven years.

## 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 or dependent adult 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. Also, whenever you enter your psychological status as an issue in a legal proceeding, you have waived the right to past, present, or future confidentiality regarding psychological services provided to you.
- 8. In the event of an account becoming delinquent, it may be necessary for me to turn the account over to a collections service.

- 9. 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.
- 10. There may be times when it is necessary to speak to your referring therapist, if applicable, to discuss possible treatment plans or readiness for therapy. This may need to occur prior to proceeding with appointments. The appropriate consent forms will be discussed at that time.
- 11. 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.

### ABOUT THE THERAPIST

I am a licensed Marriage and Family Therapist. I have a Masters of Arts degree in Psychology. I have taken additional training in Christian Sexual Therapy and EMDR. I am licensed with the state of California. My private practice is mainly dedicated to intimacy issues and sexual therapy. I work with individuals and couples that are facing personal, sexual, and relational concerns. I am thankful to have trained with some of the top Christian sex therapists in the profession. In our therapy sessions, we will work together toward positive transformation that can help you achieve overall wholeness and increased fulfillment.

It is not always easy to open up about sensitive topics. I strive to provide a relaxed and safe environment in order to facilitate sharing of your struggles, concerns, and hopes. We will identify unhealthy thought and behavioral patterns, past trauma, and other areas that make you feel stuck. Each individual or couple is unique. Therefore, a well rounded review of social, spiritual, physical, and psychological information is important. Then, we will establish a plan with goals, develop skills, and find helpful resources in order to align you to the best path forward.

I have been educated in many modalities and will work toward tailoring one to fit your needs. Some of these therapies are cognitive behavioral, sexual, and trauma-based. I provide an empathetic and non-judgmental approach. I welcome you to inform me of your individual needs. The best outcome in therapy is achieved by working toward your goals as partners.