

Client-Therapist Agreement

Psychotherapy is not easily described in general statements. It varies depending on the personality of both the therapist and the client(s) and the particular problems being addressed. Psychotherapy can aid you in discovering tools, techniques, and a stronger sense of self, that can be utilized to improve the quality of your life and your relationships. Psychotherapy involves change, and at times change may bring up emotions that may be uncomfortable and possibly even difficult, not only to you but also to those people close to you. The prospect of giving up old habits, no matter how destructive or painful, can often make one feel very vulnerable. The process can include experiencing feelings like sadness, guilt, anxiety, anger, and fear and making changes that you did not originally intend. Like any professional service, therapy may not work, and for a relatively small number of people, problems may get worse. Even so, many people find that therapy is worth the discomfort they feel.

As the client involved in this process I ask that you work with me in an honest and collaborative manner. That may include asking me about my professional experience, background, and theoretical orientation. As the therapist I am offering the following information regarding the therapeutic relationship in response to frequently asked questions. If at any time you have further questions about our working relationship, please discuss them with me. Maximum benefit from therapy can be obtained only in a frank and open atmosphere.

Frequently Asked Questions

Fees and Appointment times

- My fee is \$200 for the standard 45-50-minute session. For individual psychotherapy, standard sessions are usual. For couples and families, I strongly recommend the first few sessions be scheduled for a session and a half (75-80 minutes) which is pro-rated at \$280. For therapy to be most productive, weekly sessions are recommended, especially in the early phases of the work. The length of sessions, and the frequency of sessions, will be best decided collaboratively, after the initial consultation sessions.

Payment for services is requested at the time of the session. I accept cash or checks. Monthly billing arrangements are available upon request. I am going to begin offering the use of credit cards for payments within the year. So feel free to tell me if you would like that option when it is available.

Please, if at any time during your treatment your financial situation changes significantly, I invite a frank and direct discussion with me to work out possible financial arrangements so your treatment will not be interrupted due to financial concerns. In the same manner, as a business owner, I will need to adjust my fees periodically. I will not raise your fees sooner than one year from your start of therapy. If I raise my fees while you are in treatment, I will give you advance notice, and ask you to openly discuss with me if a change is problematic.

Insurance

I do not accept direct insurance payments, nor am I a provider for any HMOs or PPOs. If your policy allows for full or partial payment for providers outside a panel, or if you are enrolled in a pre-tax spending program through your employer, I will gladly provide you with monthly statements that you may submit in an attempt to receive reimbursement. Please talk to me if you need this type of statement to assist you financially.

Missed or cancelled appointments

Missed or cancelled appointments will incur your usual fee for the time scheduled unless a 24-hour notice is given. Please leave any cancellation notification or a request for a change in your appointment time on my answering machine and in an email.

Telephone calls and emergency services

Because of the nature of private practice, I do not offer 24-hour crisis services. If you feel a need for extra support, please talk to me about this in our sessions, and we will work out arrangements for phone calls or shorter meetings in-between regular sessions. If you are in crisis and need immediate assistance please call the Sutter Center for Psychiatry at 916-386-3620. In Yolo County you may reach the Crisis Counseling Line at 530-756-5000. In case of a life-threatening situation please go to your nearest emergency room or call 911.

Confidentiality

Your therapy will include talking over very private things with me. To a great extent, my ability to help you will depend on how open you can be about yourself---your thoughts, feelings, and actions. So that you may feel free to talk openly with me while also protecting your right to privacy, as a licensed therapist it is my duty to keep information confidential. Generally this means I cannot discuss your case with anyone or send out information about you without your permission. To serve you best, it is standard practice for me to collaborate with other mental health providers you are working with, or even in some situations, with providers with whom you have worked with previously, or in rare situations, to speak with a family member. Any of these collaborative conversations may only occur if you sign a consent form allowing me to exchange information with that particular person. You also have the right to limit the content of my contact, and rescind the permission in writing at any time. However, remember limiting contact might hinder the team effort of your providers.

Specific confidentiality for couples. When you are in couples therapy, “the couple is my client”, which means both partners need to sign any release of information for me to speak with other providers of care. As part of couples therapy, I might find it helpful to meet with each of you individually from time to time. I will do this planfully and in collaboration with you both. Information you share with me while in an individual session will be held in confidence, as is true in all psychotherapy.

All confidentiality practices are to make you as safe as possible with

me, and with the therapy process. Please ask me if you have any questions or concerns.

Exceptions to Confidentiality

There are exceptions to confidentiality, however, that you should know about. Please note that most of these situations are rare, but they are important for you to understand.

1. If you threaten to harm someone else, I am required under the law to take steps to inform the intended victim and appropriate law enforcement agencies.
2. If you threaten to cause severe harm to yourself, I am permitted to reveal information to others if I believe it is necessary to prevent the threatened harm.
3. If you reveal or I have reasonable suspicion that any child, elderly person, or incompetent person is being abused or neglected, the law requires that I report this to the appropriate county agency.
4. If a court of law orders me to release information, I am required to provide that specific information to the court.
5. If you are or become involved in any kind of lawsuit or administrative procedure (such a worker's compensation), where the issue of your mental health is involved, you may not be able to keep your records of therapy private in court.
6. In order to provide you the best treatment possible, there may be times when I seek consultation from another licensed mental health professional regarding your care. In these consultations, I make every effort to not reveal your identity. Any consultant I use is legally bound by the same confidentiality laws as I am. If you would like to know who my consultants are, or have any concerns regarding any aspect of confidentiality please feel free to discuss your questions with me.

Acknowledgement and Consent

If you would like to discuss any of the above information further, before treatment begins, or at any time, please do not hesitate.

By signing this form, you are acknowledging that you understand and consent to what you have read above.

Name (print)

Date

Name (signed)

Date

Name (print)

Date

Name (signed)

Date

Signature of Witness

Date