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INFORMATION FOR CLIENTS

Welcome to my practice, and thank you for giving me the opportunity to assist you. This document answers questions that clients often ask about therapy, and it is yours to keep. Please read all of it. Note any questions you have, and we can discuss them when we meet. When you have read and fully understood this, I will ask you to sign it at the end. I will sign it as well and make a copy, so we each have one. I believe our work will be most helpful to you when you have a clear idea of what we are trying to do.

My Background

I have worked at varied clinical settings, including Counseling Centers, hospitals, schools, and private practice. I have also worked in the field of Corporate Education and have taught at the college level. I hold these qualifications:

- I have a doctoral degree in Counseling Psychology from McGill University in Montreal, a program which is accredited by the American Psychological Association (APA).
- I completed an internship in Counseling Psychology, accredited by the APA.
- I am licensed as a psychologist in the State of New Hampshire.
- I am a PSYPACT-certified psychologist authorized to see telehealth clients in participating states.
- I am a National Board Certified Health and Wellness Coach (NBC-HWC)

About Psychotherapy

I strongly believe you should feel comfortable with the therapist you choose, and hopeful about therapy. When you feel this way, you will more likely benefit from therapy. Clinically, I integrate several theories, one of which is cognitive-behavior therapy, or CBT. This approach is based on the idea that changing the way we think can have a profound impact on our thoughts and feelings. In turn, this can help us recognize and utilize the resources we have to work towards our most important goals. I see psychotherapy as a collaborative, trusting relationship between two equal partners. Though you may not realize it, you are actually an expert in understanding your own thoughts and feelings; my job is to guide you by pointing out things that you may not be aware of because I can be somewhat impartial.

I usually take notes during our meetings. You may find it useful to take your own notes, and also to take notes outside the office. By the end of our first or second session, I will offer some recommendations for how I think we should proceed. Since therapy is a partnership between us, you ultimately determine what you would like to change; I use my expertise to help you make those changes. Psychotherapy is not like visiting a medical doctor. It requires your very active involvement. It requires your best efforts to change thoughts, feelings, and behaviors. For example, I will likely encourage you to help define goals for therapy, so that you are an active participant. And, while I may be the best therapist for one person, it may not be the best fit for the next person. Usually, we will have a sense for this by the end of our first, and sometimes our second meeting.

I expect us to plan our work together. In our treatment plan we will list the areas to work on, our goals, the methods we will use, the time and money commitments we will make, and some other things. I expect us to agree on a plan that we will both work hard to follow. From time to time, we will look together at our progress and goals. If we think we need to, we can then change our treatment plan, its goals, or its methods. As a counseling psychologist with a focus on health and wellness, I generally use evidence-based approaches focused on building strengths. In light of this, I don't generally provide DSM diagnoses to clients unless there is a clinical need to or a third party payor such as an insurance company requires it. We will discuss the implications of such diagnoses when we first meet, and, in the case that I provide a diagnosis, I will share that with you beforehand.

An important part of your therapy will be practicing new skills that you will learn in our sessions. I may ask you to practice outside our meetings, and this may involve reading a few pages of a book, taking note of certain thought patterns or practicing something new. You may have to work on relationships in your life and make sustained efforts to get the best results. These are important parts of personal change. Change can at times be slow and frustrating, and I will help support your efforts. There are no instant, painless cures and no "magic pills." However, you can learn new ways of looking at your problems that may be very helpful for changing your feelings and reactions.

Most of my clients see me once a week for 3 to 4 months, though this can vary. After that, we meet less often for several more months. Therapy then usually comes to an end. The process of ending therapy, called "termination," can be a very valuable part of our work. Stopping therapy should not be done casually, although either of us may decide to end it if we believe it is in your best interest. If you wish to stop therapy, or even just take a break from therapy at any time, I ask that you agree now to meet then for at least one more session to review our work together. We will review our goals, the work we have done, and any future work that needs to be done.

The Benefits and Risks of Therapy

As with any effective treatment, there are some risks as well as many benefits with therapy. You should think about both the benefits and risks when making any treatment decisions. For example, in therapy, there is a risk that clients will, for a time, have uncomfortable levels of sadness, guilt, anxiety, anger, frustration, loneliness, helplessness, or other negative feelings. Clients may recall unpleasant memories. These feelings or memories may bother a client at work or in school. Also, clients in therapy may have problems with people important to them. Family secrets may be told. Therapy may disrupt a marital relationship and sometimes may even lead to a divorce. Sometimes, too, a client's problems may temporarily worsen after the beginning of treatment. Most of these risks are to be expected when people are making important changes in their lives. Finally, even with our best efforts, there is a risk that therapy may not work out well for you.

While you consider the risks, you should know also that the benefits of therapy have been demonstrated in hundreds of well-designed research studies. People who are depressed may find their mood lifting. Others may no longer feel afraid, angry, or anxious. In therapy, people have a chance to talk things out fully until their feelings are relieved or the problems are solved. Clients' relationships and coping skills may improve greatly. They may get more satisfaction out of social and family relationships. Their personal goals and values may become clearer. They may grow in many directions—as persons, in their close relationships, in their work or schooling, and in the ability to enjoy their lives. I do not take on clients I do not think I can help. Therefore, I will enter our relationship with optimism about our progress. Should either one of us have concerns at any point that therapy is not helping, I ask that we agree to address this so we can make whatever changes might be needed.

Consultations

If you could benefit from a treatment I cannot provide, I will refer you to another professional. You have a right to ask me about other treatments, their risks, and their benefits. Based on what I learn about your needs, I may recommend a consult with a different professional. If I do this, I will fully discuss my reasons with you, so that you can decide what is best. If you are treated by another professional, I will coordinate my services with them as needed.

If for some reason treatment is not going well, I might suggest you see another therapist or another professional for an evaluation. As a responsible person and ethical therapist, I cannot continue to treat you if my treatment is not working for you. If you wish for another professional's opinion at any time, or wish to talk with another therapist, I will help you find a qualified person and will provide him or her with the information needed.

What to Expect from Our Relationship

As a professional, I will use my best knowledge and skills to help you. This includes following the standards of the American Psychological Association, or APA. In your best interests, the APA puts limits on the relationship between a therapist and a client, and I will abide by these. In order to maintain your privacy, I try not to reveal who my clients are. If we meet on the street or socially, I may not say hello or talk to you very much. My behavior will not be a personal reaction to you, but a way to maintain the confidentiality of our relationship. Likewise, I can only be your therapist. I cannot be a close friend to or socialize with any of my clients, nor can I be a therapist to someone who is already a friend. I can never have a sexual or romantic relationship with any client during, or after, the course of therapy. I cannot have a business relationship with any of my clients, other than the therapy relationship. All such relationships risk compromising the integrity of our therapeutic relationship.

If you ever become involved in a divorce or custody dispute, I want you to understand and agree that I will not provide evaluations or expert testimony in court. You should hire a different mental health professional for any evaluations or testimony you require. This position is based on two reasons: (1) My statements will be seen as biased in your favor because we have a therapy relationship; and (2) the testimony might affect our therapy relationship, and I must put this relationship first.

About Confidentiality

I will treat with great care all the information you share with me. It is your legal right that our sessions and my records about you be kept private. That is why I ask you to sign a "release-of-records" form before I can talk about you or send my records about you to anyone else. In general, I will tell no one what you tell me. I will not even reveal that you are receiving treatment from me. In all but a few rare situations, your confidentiality (that is, our privacy) is protected by federal and state laws and by the rules of my profession. Here are the most common cases in which confidentiality is not protected:

1. If you were sent to me by a court or an employer for evaluation or treatment, the court or employer expects a report from me. If this is your situation, please talk with me before you tell me anything you do not want the court or your employer to know. You have a right to tell me only what you are comfortable with telling.
2. Are you suing someone or being sued? Are you being charged with a crime? If so, and you tell the court that you are seeing me, I may then be ordered to show the court my records. Please consult your lawyer about these issues.
3. If you make a serious threat to harm yourself or another person, the law requires me to try to protect you or that other person. This usually means telling others about the threat. I cannot promise never to tell others about threats you make.
4. If I believe a child has been or will be abused or neglected, I am legally required to report this to the authorities.

There are two situations in which I might talk about part of your case with another therapist. First, when I am away from the office for a few days, I may have a trusted fellow therapist "cover" for me. This therapist will be available to you in emergencies. Therefore, he or she needs to know about you. Of course, this therapist is bound by the same

laws and rules as I am to protect your confidentiality. Second, recognizing the benefit of a second opinion, I sometimes consult other therapists or other professionals about my clients. These persons are also required to keep your information private. Your name will never be given to them, some information will be changed or omitted, and they will be told only as much as they need to know to understand your situation.

If your records need to be seen by another professional, or anyone else, I will discuss it with you. If you agree to share these records, you will need to sign an authorization form. This form states exactly what information is to be shared, with whom, and why, and it also sets time limits. You may read this form at any time. If you have questions, please ask me.

If I must discontinue our relationship because of illness, disability, or other presently unforeseen circumstances, I ask you to agree to my transferring your records to another therapist who will assure their confidentiality, preservation, and appropriate access.

As part of cost control efforts, an insurance company will sometimes ask for more information on symptoms, diagnoses, and my treatment methods. It will become part of your permanent medical record. I will let you know if this should occur and what the company has asked for. Please understand that I have no control over how these records are handled at the insurance company. My policy is to provide only as much information as the insurance company will need to pay your benefits.

You can review your own records in my files at any time. You may add to them or correct them, and you can have copies of them. I ask you to understand and agree that you may not examine records created by anyone else and then sent to me.

In some very rare situations, I may temporarily remove parts of your records before you see them. This would happen if I believe that the information will be harmful to you, but I will discuss this with you.

You have the right to ask that your information not be shared with family members or others, and I can agree to that limitation. You can also tell me if you want me to send mail or phone to you at a more private address or number than, say, your home or workplace. If this is of concern to you, please tell me so that we can make arrangements.

Couples

Treatment records of couple's sessions contain sensitive information about each person. Therefore, in the case of couples treatment, whether the members of the couples are married to each other, unmarried, separated or divorced, both members of the couple agree that records will only be released by joint consent. In the event of a disagreement, the records will not be released without a court order.

Group Therapy

Unlike individual treatment, group therapy is not protected by law. Client concerns about confidentiality should be discussed prior to beginning treatment.

About Our Appointments

Sessions will typically last 45 minutes. Given that there is a great deal of "information gathering" that needs to take place during our first session, our very first meeting may run slightly longer. I will let you know several weeks in advance of my vacations or any other times we cannot meet. Please feel free to ask about my schedule in making your own plans.

Your session time is reserved for you. We might decide to schedule a regular appointment time every week. Alternatively, we might schedule meetings at different times or days of the week or even change the frequency of our meetings depending on what you need. Either way, I will reserve this time for you and ask you to do the same. I understand that things come up, so if you need to change your appointment, I ask that you let me know by at least 24 hours before the appointment (not counting weekends). Otherwise, you will be charged my full fee. If I am ever unable to start on time, I ask your understanding. I also assure you that you will receive the full time agreed to. If you are late, we may not be able to meet for the full time, because it is likely that I will have another appointment after yours. A cancelled appointment delays our work. I will consider our meetings very important and ask you to do the same. Please try not to miss sessions if you can possibly help it, and if you must, I would appreciate as much heads up as possible so I can plan accordingly.

Please be aware that my charging for missed appointments is not intended to be punitive. My income depends on my being able to use my available time. I have promised that time to you, and if I cannot use that time, I cannot make it up.

Fees, Payments, and Billing

Payment for services is an important part of any professional relationship. This is even more true in therapy; one treatment goal is to make relationships and the duties and obligations they involve clear. You are responsible for seeing that my services are paid for.

I currently charge \$210 for a regular therapy session. For an intake session, my fee is \$260. You will be given advance notice should my fees change. I typically accept payment following each session. Other payment or fee arrangements may be worked out before the end of our first meeting. If a 3rd party payor such as an EAP is covering your fee, you will be responsible to pay the balance should they deny coverage.

Telephone consultations may be suitable or even needed at times in our therapy. If so, I will charge you our regular fee, prorated over the time needed. If I need to have long telephone conferences with other professionals as part of your treatment, you will be billed for these at the same rate as for regular therapy services. If you are concerned about all this, please be sure to discuss it with me in advance so we can set a policy that is comfortable for both of us. Of course, there is no charge for calls about appointments or similar business.

I will assume that our agreed-upon fee-paying relationship will continue as long as I provide services to you. I will assume this until you tell me in person, by telephone, or by certified mail that you wish to end it. You have a responsibility to pay for any services you receive before you end the relationship.

Depending on your financial circumstances and total medical costs for any year, psychotherapy may be a deductible expense; consult your tax advisor. Expenses not covered by insurance can typically be reimbursed through flexible spending accounts. Cost of transportation to and from appointments and fees paid may be deductible from your personal income taxes as medical expenses.

If you think you may have trouble paying your bills on time, please discuss this with me as early as possible to ensure the best possibility of arriving at a solution. If your balance remains unpaid following notification by mail, I may need to terminate therapy. Fees that continue unpaid after this may be turned over to small-claims court or a collection service.

If there is any problem with my charges, my billing, your insurance, or any other money-related point, please bring it to my attention. I will do the same with you. Such problems can interfere greatly with our work, so it helps to work them out openly and quickly.

If You Need to Contact Me

I do not provide 24-hour emergency coverage. In case of clinical emergency, please call me at (603) 289-8838 and leave a message indicating how and when I can reach you. I cannot promise that I will be available at all times, though I will typically respond to such calls within 24 hours Monday through Friday. If you cannot wait that long and require immediate help, please call or text the New Hampshire Rapid Response Access Point at 1-833-710-6477, call 911 or go to your nearest emergency room for assistance.

If I Need to Contact Someone about You

If there is an emergency during our work together, or I become concerned about your personal safety, I am required by law and by the rules of my profession to contact someone close to you—perhaps a relative, spouse, or close friend. I am also required to contact this person, or the authorities, if I become concerned about your harming someone else. Please write down the name and information of your chosen contact person in the blanks provided:

Name: _____

Address: _____

Phone: _____

Relationship to you: _____

Statement of Principles and Complaint Procedures

It is my intention to fully abide by all the rules of the American Psychological Association (APA) and by those of my state license. Problems can arise in our relationship, just as in any other relationship. If you are not satisfied with any area of our work, I hope you will raise your concerns with me. Our work together will be slower and harder if such concerns are not worked out. I will make every effort to hear any complaints you have and to seek solutions to them. If you feel that I (or any other therapist) have treated you unfairly or have even broken a professional rule, please tell me. You can also contact the state or local psychological association and speak to the chairperson of the ethics committee. He or she can help clarify your concerns or tell you how to file a complaint. You may also contact the Board of Mental Health Practice, the organization that licenses those of us in the independent practice of psychology.

Our Agreement

I, the client (or his or her parent or guardian), understand I have the right not to sign this form. My signature below indicates that I have read and discussed this agreement; it does not indicate that I am waiving any of my rights. I understand that any of the points mentioned above can be discussed and may be open to change. If at any time during the treatment I have questions about any of the subjects discussed in this informed consent, I can talk with you about them, and you will do your best to answer them. I understand that after therapy begins I have the right to withdraw my consent to therapy at any time, for any reason. However, I will make every effort to

discuss my concerns about my progress with you before ending therapy with you.

I understand that no specific promises have been made to me by this therapist about the results of treatment, the effectiveness of the procedures used by this therapist, or the number of sessions necessary for therapy to be effective.

I have read, or have had read to me, the issues and points in this document. I have discussed those points I did not understand, and have had my questions, if any, fully answered. I agree to act according to the points covered in this informed consent. I hereby agree to enter into therapy with this therapist (or to have the client enter therapy), and to cooperate fully and to the best of my ability, as shown by my signature here.

Signature of client (or person acting for client)

Date

Printed name

Relationship to client: Self Parent Legal guardian
 Health care custodial parent of a minor (less than 14 years of age)
 Other person authorized to act on behalf of the client - specify

Initial here to show that you have read this page. _____

I, the therapist, have met with this client (and/or his or her parent or guardian) for a suitable period of time, and have informed him or her of the issues and points raised in this brochure. I have responded to all of his or her questions. I believe this person fully understands the issues, and I find no reason to believe this person is not fully competent to give informed consent to treatment. I agree to enter into therapy with the client, as shown by my signature here.

Signature of therapist

Date

I truly appreciate the chance you have given me to be of professional service to you, and look forward to a successful relationship with you.

Copy accepted by client Copy kept by therapist