

Licensed Psychologist + Certified Emotionally Focused Therapist 80 Technology Way, Nashua, NH 03060 (646) 704-3520 www.mybestrelationship.com

OFFICE POLICIES + INFORMED CONSENT AGREEMENT FOR SERVICES

Welcome to my therapy practice. Your first visit to a new therapist is important and you are likely to have questions. Please read this form carefully and ask me any questions that you have. Once signed, this will represent an agreement between us.

Benefits and risks of psychotherapy

Participation in therapy can result in numerous benefits, including, but not limited to, reduced stress and anxiety, improved interpersonal relationships, increased self-confidence, increased comfort and satisfaction in various arenas of your life, and the resolution of the problems that bring you to therapy in the first place. Working towards these benefits requires effort on your part, and psychotherapy will be most effective with your active involvement, honesty and openness. In order to change, you must be willing to change, both during our sessions and in the world, and this can often be a challenging process. Although psychotherapy can be rewarding, it sometimes involves talking about unpleasant aspects of your life, which can bring up all kinds of uncomfortable feelings, such as anxiety, anger, sadness and disappointment. Psychotherapy may result in decisions about making changes that were not originally intended, and sometimes a decision that you might view as positive might not seem positive to someone close to you. There are no quarantees of exactly what you will experience as a result of being in therapy.

Evaluation

During your first few sessions, you and your therapist will both be deciding whether your therapist is the right person to help you meet your goals. If your therapist feels that they are unable to offer you the services that you need, you will be given referrals to someone who has greater expertise in the area of your needs.

You should also be evaluating your therapist during this time. For therapy to be effective, it is important that you feel comfortable with your therapist. Please feel free to discuss openly how you feel therapy is going; your feedback is always valued and is an important aspect of your therapy. If you have questions, doubts or dissatisfactions with therapy, please bring them up as soon as possible and they will be addressed. If any of these doubts or dissatisfactions persist and you wish to see someone else, I will help with the process of finding another psychologist or mental health professional.

Confidentiality

Generally, the law protects the privacy of all communications between client and psychotherapist. Confidentiality is taken very seriously and information to others can only be released with a client's permission and authorization in writing, unless ordered by a court of law, or in the following circumstances, in which case a therapist has a duty to report to the appropriate authorities:

- A therapist has reason to believe that a client is in danger of harming himself/herself the therapist will do what is needed to protect the client which may involve involuntary hospitalization if the therapist feels there is an imminent risk of suicide.
- A therapist has reason to believe that a client is in danger of harming someone else the therapist may have a duty to warn to prevent such harm from taking place.
- A therapist has reasonable suspicion of child abuse therapists are mandated reporters of child abuse, regardless of who the child is and his/her relationship with the client.

Confidentiality of email, cell phone and fax communication

It is very important to be aware that email and cell phone communication can be relatively easily accessed by unauthorized people, therefore, the confidentiality of such communication can be compromised. Please notify me at the beginning of treatment if you want to avoid or limit in any way the use of any or all of the above mentioned communication devices.

Contacting Me

Email/Text/Other communication Email is used for scheduling purposes only. If you wish to reach your therapist between sessions, please call. If I am unavailable at the time of your call, please leave a message and I will make every effort to return your call within 24-hours during business days, Monday-Friday.

If you are seeing me for couples therapy and need to email for scheduling purposes, please CC your partner on all communication.

Scheduling sessions

If you becoming an ongoing client, we will most likely begin with a schedule of one 45-60 minute session per day per week, on a day and time agreed to, unless you need another arrangement. That time can then be your regular weekly appointment time, reserved specifically for you. I

t's important to begin sessions on time. Sessions must end promptly, so if you arrive late, you will not be able to have a full session.

In time, when you begin to achieve your goals, it may make sense to meet less often, and eventually taper meetings down until therapy is over. You are always welcome to schedule refresher sessions once therapy has ended.

Canceling an appointment

Because your appointment times are reserved specifically for you, please provide as much notice as possible in the case of a cancelation. With less than 24-hours notice to reschedule or cancel, you will be responsible for the full fee of your session. Insurance companies do not reimburse for missed sessions, so if you use insurance, you will be charged the full fee for the session.

Payments and insurance reimbursement

My standard fee is \$200 per 45-minute individual session or \$250 per 60-minute couples session. Other services lasting longer than 10 minutes, such as telephone conversations, site visits, report writing and reading, consultations with other professionals that you request, release of information, reading records, longer sessions, etc., will be charged at the above standard rate, pro-rated, unless indicated and agreed otherwise.

Payment is due at the time of service. Please notify me if any problem arises during the course of therapy regarding your ability to pay. In the event that your account is overdue, and there is no agreement on a payment plan, I may use legal means, such as a collection agency, to obtain payment.

Please also note that if you plan to use your insurance, not all issues/conditions/problems that bring you to therapy are reimbursed. It is your responsibility to verify the specifics of your coverage.

Late Fees

Full payment is expected at the time of service unless otherwise agreed upon. A grace period will be allowed with no late fee if payment is received by 6:00 pm the next business day. After 6pm on the next business day, there will be a \$20 charge for late payments made within the same week, and a \$30 charge the next business week. I do not permit clients to carry a balance of more than two sessions and if you are unable to pay this balance, we will discuss whether it makes sense to pause your care or develop another strategy.

Client-Therapist privilege

Client-therapist privilege results from the special relationship of the client and therapist from a legal perspective. If I receive a subpoena, I will assert this privilege until otherwise instructed by you, in writing.

Please be aware that you may be giving up this privilege if you make your mental or emotional condition an issue in a legal proceeding.

Litigation

To maintain the integrity of psychotherapy, I do not voluntarily communicate with an attorney regarding your treatment in any litigation or custody dispute in which you become involved. It is agreed that should there be legal proceedings (such as, but not limited to divorce and custody disputes, injuries, lawsuits, etc.), neither you nor your attorney, nor anyone else acting on your behalf, will call on me to testify in court or any other proceeding, nor will a disclosure of the psychotherapy records be requested.

Dual Relationships

Psychotherapy never involves sexual, business, friendship or any other dual relationships that could impair your therapist's objectivity, clinical judgment or therapeutic effectiveness, or could be exploitative in nature. Please feel free to bring up any questions that you may have about this.

Working with minors (people under the age of 18 years)

If you are under 18 years of age, I will need your parents' or legal guardian's written permission to work with you.

Consultation

Therapists regularly consult with other professionals in the field when it is felt that doing so will help the psychotherapy. During such consultations, clients' identifying information, including specifics of his/her situation, is never revealed.

Ending therapy

Both you and your therapist have the right to decide not to continue with therapy. Ideally, therapy is finished when you feel that you have satisfactorily reached your goals. Other reasons for termination include that your needs might be outside of your therapist's scope of practice, in which case your therapist will refer you to another professional. Therapy may also end if progress is not being made, or if payments aren't being made.

Once it is decided to end therapy, it is generally suggested to have at least one session to make sure that you make a smooth transition out of therapy, to make recommendations or referrals, and to discuss how to continue the progress that you have made.

In the case of an emergency

If you are experiencing a life or death emergency and you cannot reach your therapist, you can call the Police (911); or you can proceed to the nearest hospital emergency room.

Social media policy

As a rule, to protect your confidentiality, I do not friend/fan/follow/link in/DM/PM or connect with any of my private therapy clients on social media.

Public places

Similar to my social media policy, I do not engage socially with clients outside of my office. That means if we run into each other in public, I will of course respond and say "hello" if you say hi to me but I will not initiate conversation, to protect your confidentiality. I know this is awkward!

It is important that we discuss any questions or concerns that you may have, and it is important for you to understand and feel comfortable agreeing to the terms of this contract.

Acknowledgement

Your signature(s) below indicate that you have read the information in this document and agree to abide by its terms during your professional relationship with Dr. Jenev Caddell.

I understand and agree to the information in this informed consent form, including the office policies. If I am using insurance, I also acknowledge the release of information regarding my care to my health plan for the payment of claims, certification/case management decisions, and other purposes related to the administration of benefits for my health plan.

client (or parent/guardian) printed name	signature	date
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