12059 Wilderness Trail Live Oak, TX 78233 210-452-6416 www.findtrueyou.com

INFORMED CONSENT & SERVICE AGREEMENT

Dear Client,

The client-counselor relationship is a unique one, and to allow the time we spend together to be the most productive, each one of us should be aware of certain rights and responsibilities. It is necessary for me to communicate clearly and in a detailed manner the rights and responsibilities of both you ("the client") and myself, Mary Walseth, M.A., Licensed Professional Counselor ("I", "me", or the "counselor"). ("The counselor" means the Licensed Professional Counselor.) This signed form means there exists a mutual understanding of what is expected in our therapeutic relationship wherein both the client and I work toward the healthiest outcome for the client. Your signature at the end of this form signifies that you have read and understand the professional relationship and mutual responsibilities between yourself and the counselor.

Reading and Understanding the Policies Herein

This form represents an Informed Consent and Service Agreement (the "document") between the client and the counselor and contains important information regarding the professional services and business policies of the counselor. <u>Please read it carefully</u>. I will be happy to discuss any or all of these policies in greater detail with you and answer any questions. **Prior to initiating services, you will be required to sign the last page of this document and return it to me, which will indicate you have read and understand its contents.** This document is subject to amendment upon notice, and you will be informed of any changes and be given an opportunity to review and approve of such changes. You may request a copy of this agreement for your records.

Counseling Defined

A prospective client will seek counseling services when his or her life situation has become unworkable in some way or he or she is experiencing some type of personal distress. Sometimes clients will know exactly what the problems are, and sometimes they are unhappy and baffled at why their lives aren't "working". Whatever the reason for seeking help, the counselor is trained to help "cut through the fog" to help clients understand what is at the root of the problem(s) and to assist them in discovering a new directions that will lessen or end the distress.

Clinical Services

The first step in the counseling process is referred to as "intake" and comprises an initial evaluation and assessment by the counselor. You will be given, or will download from the internet, this Informed Consent & Service Agreement, the Client Intake Form and a Limits of Confidentiality Form, all of which will be the background information for the initial interview. (If you forget to bring the forms with you, you will be required to sign a copy of the Informed Consent & Service Agreement before you leave.)

The intake session is from 60-90 minutes long. By the end of the evaluation process the counselor will be able to offer you some initial impressions of her understanding of your situation and make recommendations regarding a course of treatment ("treatment plan").

During the evaluation and assessment period, the client should decide whether he or she is comfortable working with me. Client trust is extremely necessary; feeling at ease with your therapist is the most important consideration and plays a large role in whether or not therapy is likely to be successful. It may take a few sessions for a client to make this decision. Additionally, the counselor has the ethical responsibility of appraising whether or not her professional skills are sufficient to help the client. Should she feel a client may need specialized services she feels are not consistent with her training and/or experience she will be available to make a referral to another professional to work with you instead of, or in addition to, her services. A client should exercise the right to seek a second opinion or a different course of treatment if the client deems that path would be more helpful. *My number one concern at all times is client welfare*, so the client must share any concerns or doubts existing before the therapeutic relationship continues.

Therapy

Psychotherapy is something not easily defined in broad, general terms. Therapy depends on many variables including not only the professional relationship between the counselor and the client, but the particular issue(s) that define what you may be having difficulty with. There are a number of counseling approaches which can be utilized to address problems effectively, and no two counselors will have exactly the same approach. The most important ingredient in any counseling relationship is that it must be *an interactive process*. This requires active participation on the part of the client as well as on the part of the counselor. In order have as successful an experience as possible a client is best served when he or she works not only during weekly sessions but in between sessions. This can be accomplished by the counselor assigning simple "homework" to be done during the time between sessions, based on the client's therapy goals; assignments are geared to help the client build emotional skills or "muscles" in order to become happier and more effective in his or her life.

My Professional Philosophy

As a counselor I do not "fix" people; I assist individuals in finding ways to heal their lives. I firmly believe that any credit for success belongs mostly with the client, not with me. Simply put, it's as if a client is confused what about direction to go on their life journey, and I have road maps that may be of help. I'm like a lighthouse helping to guide you to shore in stormy seas, and you are captain of the ship. There are no guarantees; ultimate success in counseling always depends on the client's effort to be open to new ideas and to learn life skills designed to lessen or solve problematic issues. Your inner wisdom is already there; my guidance can help you uncover it.

Confidentiality

You have the right to confidential mental health care *except* in cases where the counselor believes you might cause harm to yourself, to someone else, or if child or elder abuse or neglect is suspected. In these cases, the counselor has a duty by law to file a report with the appropriate authorities. You will receive a form entitled Limits of Confidentiality which will explain this.

San Antonio is a "big small town" and there is always a possibility we could run into each other outside of the office. If we are outside the office, please understand that I will not acknowledge you or say hello. This is my custom with clients I am currently working with or have in the past, and I do this to ensure your right to *confidentiality, protection and privacy*. However, if you want to greet me, visit with me or introduce me to your friends or family who are with you, I will happily acknowledge you! I will not identify myself as your therapist. In these rare chance meetings the client takes the lead in saying hello and/or identifying who I am to others in public.

Payment for Services – Insured & Private Pay Policy

The counselor respects your time and sets aside a specific time slot to see you when you make appointments. If a client makes an appointment with the counselor, the appointment is considered to be a *contract for the counselor's time*. <u>Clients wishing to cancel or change an appointment must give</u> <u>the counselor 24-hours' notice in order to avoid being charged for the appointment</u>. Such 24-hour notice is required because in most cases the counselor will not be able to utilize that time for other clients on short notice. The counselor understands and is flexible when appointments are missed or rescheduled in some cases.

<u>IMPORTANT!!</u> If you cannot make your scheduled appointment you must call <u>24-hours in advance</u>. Please do <u>NOT</u> email your cancellation. If you do not show up for a scheduled appointment and have not cancelled properly, you will be charged for that time. The fee for missed appointments (no show, no call or late cancellation) is \$75.00.

Mary Walseth, LPC (also referred to herein as "the counselor") can accept cash/credit card payments and/or copayments. Private pay is \$120 initial session, \$80 for continuing sessions for individuals.

Insurance coverage must be verified by my office before the first visit. It takes about 24 hours to verify your insurance. As providers, we need to verify your behavioral health coverage and copay amount. If you are covered under an Employee Assistance Program ("EAP") you are already approved and can be seen the day you call (if time available). However, you must call the EAP office and let them know that you have scheduled an appointment before you arrive at your first session so we have the paperwork faxed by the EAP for our files. We will remind you of this when we speak to you when setting up your first session.

Payment is expected at time of service. For those without insurance, the counselor will maintain the private pay and hourly rate quoted to you above for 6 months from the first date of service, at which time the rate may be subject to change. Clients arriving up to 15 minutes late will receive the remaining session time left for the scheduled appointment, but will be charged the full rate.

The counselor respects your time and makes every effort to remain on schedule throughout the day. On very rare occasions emergencies arise in the counseling office. If this occurs and your session would be delayed 15 minutes or more, you will be contacted by telephone or text message and may be asked to reschedule. <u>You will not be charged for a cancellation if your session is</u> <u>cancelled/rescheduled by our office</u>.

Please do your best to be prompt to your appointments. If you are 15-30 minutes late, your session may have to be shortened or cancelled due to other pending client appointments. I do not like to keep other clients waiting who are on time for their appointments (including you!). I am fairly laid back in my private practice, but I do appreciate your cooperation in being on time. (See the section "Payment for Services" on page 3.)

In some rare cases a client may end up owing the counselor for services. In such cases the client agrees to pay the remaining balance upon request. **NOTE:** *If your account is more than 60 days in arrears, the business office of Mary Walseth M.A., LPC will refer the account to its attorneys and/or a collection service. If such legal action becomes necessary, the costs of fee-collecting services will be included in the claim. Please note that such collection fees, if levied, can be quite costly.*

PLEASE NOTE: information pertinent to any such fee collection action as described immediately above, in most cases would include the name, the nature of the services provided, and the amount due and perhaps correspondence about the bill in question. <u>No confidential information will be</u> <u>revealed</u>.

Protecting Your Information & Credit Card Number on File

IF REQUIRED BY OUR OFFICE: For reasons explained in the box on page 3 of this Agreement, you may be asked to provide your credit card information. State law and professional ethics require us to protect your personal information. You can be sure that I and my office staff are extremely protective and respectful of this personal information and your rights to privacy. We take full responsibility in protecting your privacy, and all information is kept in securely locked files.

If a client does not show up for a scheduled appointment or cancels at the last minute without giving 24-hours advance notice, the credit card will be charged for the full cost of the scheduled missed appointment. *In addition, if payment is made by check and a check is returned, the outstanding amount will be charged to the credit card or billed to you, including a \$30 returned check fee and any other fees ascribed by the bank.*

Once again: Clients who miss appointments ("no call, no show") without 24-hours prior notice will be charged the Full Fee for the missed appointment regardless of insurance status.

When You are sick...

If you are sick and must miss an appointment, or experience a dire personal emergency, *the counselor has the authority to forfeit the missed appointment fee at the counselor's discretion and on a case-by-case basis*. A "personal emergency" is defined as a serious emergency where health issues, accidents or emergency hospitalization are required for yourself or family members. <u>"No shows" are</u> *not considered emergencies if no effort is made by you or a representative of yours to contact the office before or after the appointment day and time*. (Refer to the section "Payment for Services" on page 3.)

Office Hours & Crisis Policy

The counselor works in her home setting and will make available the living area as a waiting room. You may use the restroom down the hall, first door on the left, at any time.

The counselor sees clients by appointment during normal business hours Monday through Friday. Appointment time begins at 10:00 AM, and ends with the last appointment scheduled no later than 7:00 PM. If you have a crisis during business hours and do not have a scheduled appointment, the counselor will make every effort to fit you in that same day. If for any reason the counselor is unavailable or you experience crisis outside of the above business hours, go to your nearest hospital emergency room or call 911 for assistance.

Other Issues

Occasionally clients ask me to fill out and sign forms or write letters for them regarding things to do with leave of absence, custody issues, disability leave, school excuses, etc. The counselor will do this in most cases without charge, unless the task is involved and takes more than 30 minutes. If the work needed takes more time than 30 minutes, the counselor's fee is \$80 per hour (or \$20 for each 15 minutes over 30 minutes). If the counselor is ever subpoenaed to court on behalf of the client (adult or minor) a \$350 fee will be required for such services (this fee is your responsibility; insurance does not cover it).

Finally...

By signing this form you agree that you have read and understand all policies within. <u>You also agree</u> <u>that you are financially responsible for any fees that are accrued for yourself or members of your</u> <u>family, including dependents who may or may not be over the age of 18, while under the care of Mary</u> <u>Walseth, LPC.</u>

Client Signature (Parent if Client is a Minor)

Date

Spouse/Partner Signature (if applicable)

Date

Mary Walseth, M.A., LPC

Date