

Informed Consent for Psychotherapy

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. The outcome of your treatment depends largely on your willingness to engage in this process, which may, at times, result in considerable discomfort. Remembering unpleasant events and becoming aware of feelings attached to those events can bring on strong feelings of anger, depression, anxiety, etc. 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.

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 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.

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.

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 My name is Denise Folsom and I am a Licensed Mental Health Counselor (FL#14624) and Registered Play Therapist. I received my Master's Degree in Psychology and Counseling from Troy University. My previous profession as an Early Childhood Educator included teaching grades K-3 as well as a Behavior Interventionist for ages 0-6. I have conducted workshops for caregivers and parents including topics such as behavior management, communication, attachment and goal setting. In addition to extensive experience with young children, I am a military spouse and mother of three. I feel that my understanding of both parents and military lifestyles enables me to have a real world view of the challenges that occur in both populations.

As a therapist I have worked extensively with active duty military members and their families. In my role as Program Manager for Emerald Coast Behavioral Hospital's Military Resiliency Unit, I have treated all aspects of life including combat/military trauma, sexual trauma, substance use/other addictions, depression, anxiety, separation, etc. I am trained in and have comprehensive experience in Cognitive Processing Therapy (CPT), Prolonged Exposure (PE) for PTSD as well as EMDR, Dialectical Behavioral Therapy and Play Therapy.

Fees, Insurance Reimbursements, and Cancellations:

In return for a fee of **\$175.00** for the initial intake and **\$125.00** per individual/couple/family/group session, I agree to provide therapeutic services for you. Sliding fees are available on an individual basis and should be agreed upon during the first appointment. The fee for each session will be due and must be paid at the conclusion of each session. Cash, credit cards or personal checks are acceptable for payment.

There are options for a reduced rate depending on individual situations and/or referral sources. Reduced rates are the sole discretion of the therapist and are determined on a case by case basis.

If insurance is utilized and I have been pre-approved for your policy, I will be happy to assist you in any way to facilitate compensation for services; however you are responsible for providing accurate and updated information regarding your insurance benefits as well as any change in address and/or telephone number. If your insurance is inactive or ineligible, you may choose to cancel your appointment(s) or pay out-of-pocket. You are responsible for knowing the limits of your insurance. In the event of an insurance denial of payment, you are personally financially responsible for charges. If a deductible applies, you are responsible for paying for the hourly costs of treatment at the time of service until your deductible is met.

I agree to pay in full all outstanding balances at the time of service. I recognize my failure to pay my account in full within 30 days after services are rendered may result in my balance being placed with a collection agency and possible listing with the credit bureaus. It is possible that therapy will be terminated for nonpayment of fees.

Attendance Policy

Consistent attendance at mental health appointments is vital to making therapeutic progress and obtaining valid assessment results. When an appointment is scheduled, that time is reserved for

you and/or your family. Because of this, you must contact us at least 24 hours before your scheduled appointment to reschedule or cancel. There will be a charge of **\$125** per hour scheduled for all no shows and unexcused cancellations (i.e., non-emergencies) without 24 hours' prior notice. Insurance companies do not reimburse providers for no-shows and cancellations. Thus, payment will need to be made prior to the scheduling of another appointment. Related to attendance, please be advised that your provider may discontinue services for the following reasons: failure to attend 2 consecutive appointments without at least 24 hours' notice, unexcused last minute cancelling/rescheduling of your scheduled appointments, failure to answer or return 4 calls from your provider made over a 2-week period.

Other Possible Charges

All other professional services, such as writing letters on behalf of patients, completing forms, making copies, extended phone or in person contacts with other professionals at your request/on your behalf, preparing treatment summaries, etc. are subject to charges.

For completing forms and writing letters and treatment summaries, you will be charged at a rate of \$65 per half-hour (30 minutes). For extended phone or in person collateral contacts at your request, you will be charged at a rate of \$65 per half-hour (30 minutes). For copying medical records, you will be charged at a rate of \$0.40 per page (including copying and clerical costs), plus the actual cost of postage. Be aware that these copying fees are well below the Florida reasonable rate fees for copying medical records (which are \$1 per page).

Legal Involvement:

My role with you and your family is limited to providing therapy and group services. I do not conduct custody evaluations or provide recommendations about custody or custody arrangements, including visitation schedules. I will not voluntarily become involved in any legal dispute. I do not participate in person, by phone or in writing in any court related matter that the client of Denise Folsom may be a party to or become a party to in any way. I do not write letters regarding their client's treatment to any entity, including court. At no time will I offer an opinion or recommendation in any court matter, especially as it relates to custody

While it is not my regular practice to participate in legal proceedings, it is possible that I may be required to participate in and attend meetings/court proceedings related to a legal matter. In this instance, you will be responsible for charges related to professional time, including preparing, traveling, testifying, attending, and any other case-related costs.

If a court order is served and is requesting that I be present in person and or there is a request for records, the client's consent will be requested before turning over confidential information. When obtaining this consent, the client will be told exactly what has been requested by court and there is no guarantee that the information will be kept confidential. This includes a client's mental health history; current status and inclusive records and may not be in the best interests of the client. The therapist client relationship does not render the therapist as an advocate. The therapist will withhold any opportunity to engage in a dual relationship with the client.

Court Policy & Fee's

-Please be advised that should I be ordered by court to write a letter to the court, the time shall be billed at \$200 per hour.

-Please be advised that should I be court ordered to appear in court, the fee stipulation is as follows:

- \$2,000 per day plus \$200 per hour for travel to and from the court.
- \$200 per hour for preparation

-I, Denise Folsom, will **NOT** be ON-CALL at any time. Should a case be trailed, the therapist will be paid in full for each day as well as an additional \$1,000 per day as it hinders the therapist's or intern's ability to be available to their other clients.

-All court fees must be received by cashier's check 14 days prior to the court date. Should the court calendar the hearing for another date, the therapist or intern must be re-issued a court order with the new court hearing date.

-Should I be on vacation, the party initiating the court order must take reasonable steps to avoid imposing undue burden or expense on a person subject to the subpoena.

Policies Regarding Children/Adolescents

Confidentiality for Children and Adolescents

Parents and guardians of children receiving psychotherapy usually have the right to know their child's diagnosis and general progress in obtaining therapeutic goals. Your child's therapist will involve you in helping your child to the degree that this will facilitate your child's progress. And your child's therapist will share with you information that the child wishes to be shared. However, your child's trust in his/her therapist and privacy are crucial to treatment success.

- The content of your child's sessions must be confidential in order for your child to be able to confide in his/her therapist.
- Parents must agree to honor the child's confidentiality and the privacy of the child's record. I treat this as legally binding, although it sometimes may be overridden by a judge.

In treatment of adolescents, there are many issues that therapists have no opportunity to address unless adolescents trust that communication in therapy will not be shared with parents or guardians. Your adolescent's therapist will work to help him or her behave in ways that are not self-destructive, that do not limit his or her options for the future, and that are respectful of others. If any such issues rise to the level of serious, imminent danger to self or to others, the appropriate authorities must be notified, and parents will be notified unless contraindicate

Touch and Therapy with Children/Adolescents

Touch is a normal, healthy part of all parent-child interactions and is very important for the healthy development of all children. I use various kinds of touch in my treatment. I use touch that is playful and engaging. I use touch that is nurturing. I use touch to organize and modulate activities. I use touch to help or guide a child. A child who has been inappropriately or hurtfully touched in the past needs to relearn what gentle, fun, and appropriate touch feels like, and therefore learn that he/she is worthy of this kind of treatment. Also, children who may be extremely sensitive to touch need physical closeness and playfulness, therefore, treatment seeks ways to provide these experiences in ways that are tolerable for the child, and eventually to expand his/her tolerance for new sensory experiences. If a child is angry, deregulated or out of control in a session and has not responded to other efforts to calm him/her, I, with the assistance of the parent(s) stay and contain the child in some way; this may involve cradling the child on the lap of the adult, an arm around the child, or close soothing physical contact. If you are able, you the parent will contain your child with support from me. As soon as your child settles, the containment stops and the adult continues interacting with the child. Containment is done in reaction to the child's deregulated behaviors; I will never provoke your child in order to contain him/her.

Touch may also be included in other types of therapy including family, attachment, and EMDR.

Treating Children of Separated or Divorced Parents

In families of separation and divorce, children's therapists work to help them cope adaptively with the forces acting upon their lives.

Treating children in these contexts is difficult because:

1. Both parents usually have different views of the forces acting upon the child and the child's needs.
2. Parents' views may be affected by their own psychological experiences, issues, and needs.
3. Both parents usually fear that the child's therapist will side with the other parent.
4. Both parents usually fear that the child's therapist will make custody or visitation recommendations that are not in the best interest of the child or parent.

For these reasons, your child's therapist has instituted the following policies in treating children of separated or divorced parents who share legal custody:

1. Both parents must consent to treatment, ideally before the first session with the child, or shortly thereafter, or therapy must be ordered by a family or guardianship court, or by the child's attorney or guardian ad litem.

2. Both parents will be offered “equal time” in face-to-face or phone contacts as much as realistically possible, unless this is contraindicated, such as cases in which the therapist judges that contact with one or both parents might negatively affect the child (e.g., if there is a concern related to parental abuse or threats to the child).
3. Your child’s therapist will not communicate with attorneys for either parent or guardian.
4. Any information provided by one parent may be shared with the other parent by the child’s therapist.
5. Your child’s psychotherapist will not provide custody or visitation recommendations to the court, mediator, or psychologist conducting a custody evaluation.

If the child has a court representative (attorney, guardian ad litem, or other advocate), or if requested by both parents, your child’s therapist may discuss general observations about the child with the court representative. If either parent later tries to force your child’s therapist to disclose information on your child’s therapy to a court or court representative, the therapist will assert the child’s right to privileged therapeutic communication and will present this document to protect this right. However, a judge may nonetheless force the release of verbal or written information on the child’s therapy. Your child’s therapist may discuss this unfortunate potential limit on confidentiality with your child, depending on the child’s age, the parents’ degree of respect for the child’s confidentiality, and my clinical judgement. This knowledge might result in your child being less open with me than if there were absolute confidentiality. These policies may not apply when a parent resides out of the area or is incarcerated, when parent-child contact is limited by a court (Juvenile, Family, or Guardianship) or court representative when there is substantial evidence that a parent has abused, endangered, neglected, or abducted a child, when the child has been exposed to domestic violence, when communication with a parent might physically or psychologically harm a child or damage the therapeutic relationship, or when a parent fails to respond to the therapist’s attempts to establish contact with that parent.