

Informed Consent

This document contains important information about our professional services and business practices. Please initial each section as you read and agree to it. If you have any questions, please let me know as soon as possible

1. Participation In Psychological & Coaching Services _____

- a) Participation in psychological assessment and counseling can result in a number of benefits. However, working toward these benefits requires effort on your part and requires your active involvement, honesty and openness in order to change. I will ask for your feedback and views on progress and other aspects of the therapy and I truly hope we'll have a great relationship where you can be open and at ease in your feedback. Please be mindful that during our sessions, remembering or talking about unpleasant events, feelings or thoughts can result in your experiencing some discomfort or feelings of anger, sadness, and worry or experiencing enhanced anxiety, depression, or insomnia. We will work through each one of them as you bring them up to me.
- b) Sometimes, I may challenge some assumptions or perceptions or propose different ways of looking at, thinking about, or managing situations that may feel upsetting. Getting out of our comfort zone is necessary for change and progress. Attempting to resolve issues that brought you to therapy in the first place may result in changes that were not originally intended or forecasted. But, generally, you cannot change what you refuse to confront! A little tough love is ok from time to time.
- c) However, participation is voluntary and you can terminate therapy or any services at any time.
- d) This is a fee for service practice. Full session (50 min) is \$125. Booster session (30 min) is \$70. Extended session (90 min) is \$225. We do not accept insurance for many reasons. We've listed them in our FAQ on the website. However, if you wish to submit an out-of-network claim to your insurance company, we will provide you with the necessary information. We accept cash, check, and all the basic credit cards. Payments can be made online through the client portal or in the office prior to the appointments. We save the credit card information in a secure client portal.

2. Duration and Termination _____

- a) We generally recommend 6 sessions after the first visit in order to see sizable progress. However, everyone is different and moves at a different pace. Committing to the process and prioritizing a specific time (weekly or monthly) is what makes a difference. Occasionally, people attend therapy more often. Others may reduce frequency once things improve. In addition, we offer shorter, booster sessions (30 min) or longer sessions (90 minutes). The longer sessions are an option for those looking to get a jump start or if there's

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a need for more intensive work for a set period of time. Extended sessions can be helpful for busy clients or couples who have trouble coming in weekly or who need intensive work.

- b) Some clients come for a few months until they get back on track. This is considered shorter term counseling. Some clients use therapy for a period of time, take a break, and return when they are ready or need to do more work. Some may benefit from longer term counseling. They may have long standing issues, difficult childhood or recent experiences, on-going stressors in their career, relationships, health, recovery, families, or multiple issues that require a lengthier counseling process.
- c) At times, it also becomes clear that a different approach or a higher level of care is best or necessary. My code of ethics and license require that I put your needs first in treatment planning. If I no longer feel that I am the right resource for you, I will offer referrals to other sources of care, although I cannot guarantee the outcome of anyone else's therapeutic services. Once you have stopped attending you are no longer under my care and our therapeutic relationship will be ended unless you re-start treatment with me.
- d) Ending therapy well is important. Length of counseling varies and is up to the client, however, please let me know if you feel ready to complete this course of counseling so that we can have 1-2 wrap up sessions to solidify gains you've made and to discuss recommendations to maintain progress. Often when we approach ending clients choose to switch to monthly sessions for 3 months then reassess if they are ready to end or continue less frequently. I am always open to working with you to find what is best.
- e) Please be on time for our scheduled appointments. Most sessions are 50 minutes, not a full hour. It is important to have about 10 minutes in between session to complete notes and review information for the next session. Please be courteous to the next client by not running over on your time.

3. Confidentiality _____

- a) All information and conversations are kept private and confidential unless you provide written and specific authorization to share it such as if you need me to speak with your physician or another therapist.

Exceptions include:

- **threat of imminent serious harm to self or others,**
 - **suspected abuse of a minor, elder or disabled adult,**
 - **a valid court order,**
 - **in the event of a circumstance requiring immediate medical attention.**
- b) In couples and family therapy, or when different family members are seen individually, confidentiality and privilege do not apply between the couple or among family members. I will use my clinical judgment when revealing such information. I will not release records to any party unless I am authorized in writing to do so by all adults who were part of treatment unless compelled to do so by law/valid court order. **If coming for family or couples' sessions please sign below that you agree to the confidentiality limits and understand that I will not withhold info between parties involved in treatment.**

***SIGN HERE if coming as a couple/family:**

4. Confidentiality of email & text communication _____

Homework and checking in between sessions are standard services in my practice. I can use regular email or our client portal. The latter is password protected and secure. The former is easier to use but I cannot guarantee its security. My messages generally do not include diagnosis information, just homework and next appointment arrangements. Email and text messages are not guaranteed confidential. Please choose which way you'd prefer to communicate and please initial your option:

Regular email: _____ Or Client Portal _____

Our practice also maintains a Subscriber Content Hub, which is a database of free and affordable resources to complement our work in sessions. When you become a client, you'll automatically be given access to our Subscriber Hub. You'll get an email with your user ID and password to log in. You may get monthly emails from me with updates to the content. If you choose to opt out of these updates, you can easily unsubscribe at any time.

5. Professional Records _____

a) In accordance with state law, we are required to inform you of how your records will be securely stored and transferred and how you may access your records. We maintain all the records electronically on a secure, HIPPA compliant server. Should I terminate my business or sell the practice, I will inform you 30 days prior to such a transaction that your records will be transferred to a third party and if there is change in procedure of how to access your records.

b) I will maintain your records for a period of at least 7 years after the termination of treatment. After the minimum record maintenance period then records will be permanently deleted.

c) If you would like copies of or access to your records then you must submit a request in writing. Request for copies or access will be granted within 14 business days of receipt of such request, unless I believe that release may be harmful or otherwise not in your best interest. The access does not extend to testing protocols. As these are professional records, they can be misinterpreted by untrained readers.

6. Consultation _____

On occasions, it may be necessary to consult with licensed professionals regarding my clients when doing so might improve the outcome for the client. The client's name or other identifying

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information is never disclosed. The client's identity remains anonymous and confidentiality is maintained. All mental health professionals as well as my administrative staff are bound by the same rules of confidentiality.

7. Late Cancellation _____

If you need to reschedule, please call me as soon as possible. Unlike medical doctors who can overbook and spend 15 minutes with a patient, therapists need to block a full hour. Since I hold a spot for you making it unavailable to another client, if less than 24 hours is provided, you will be charged \$100. If you do not show for a scheduled appointment without a cancellation call, you will be charged full fee for the missed session.

All reschedules or cancellations need to be done through confirmed communication. I may make an exception to the late fee based on the circumstances and if we are able to reschedule to another time that same week. If coming for couples counseling and one member is unable to attend, sometimes it's appropriate for the other member to attend to continue progress or to work on individual issues.

We require a one session pre-payment when we set up the appointment if a client cancelled one previous appointments and did not pay for the missed sessions.

8. Litigation Limitation _____

Due to the nature of the therapeutic process and that it often involves making a full disclosure with regard to many matters which may be of a confidential nature, you agree that should there be legal proceedings (such as, but not limited to divorce and custody disputes, injuries, lawsuits, etc.), neither you (client) nor anyone else acting on your behalf will call on me to testify in court or at any other proceeding. However, if my appearance at court on your behalf is required by law and you have signed a release form allowing this, my fee is \$1,250 per day to reserve my time and must be paid in full 30 days prior to the expected court date.

9. Telephone & Emergency Procedures _____

Our practice is set up to provide very specific outpatient psychotherapy & coaching services. We are not set up as a crisis center and do not provide crisis management services. We try to return calls and emails within 48 business hours.

I have read and accepted the above policies.

CLIENT SIGNATURE _____

PRINTED NAME/DATE _____