

Intentional Living

INFORMED CONSENT AND AGREEMENT

THE THERAPEUTIC PROCESS

We believe that the therapeutic process can be one of the most challenging and the most rewarding endeavors anyone can take. Those involved in therapy can begin to better understand their own life as well as their relationships with other people. Therapy can provide an opportunity for an individual or a couple to set aside time to focus on the issues prevalent in their lives, and to actively begin to communicate desires, goals, and dreams to one's self as well as to one another.

It is our belief that you are the expert on your life and that you have the solutions to your issues or concerns. We can help you in uncovering those answers by asking you questions that you may not have asked yourself before. Our role in the therapeutic process is not to give you the answers that you seek but, instead, to give you a space and an opportunity to find those answers within yourself. We will spend time exploring the concerns which brought you into therapy. We will also talk about your relationships with significant people in your life as well as your view of yourself. In time, you will determine what goals you would like to set for your time spent in therapy, and we will work together to develop an appropriate plan to allow you to achieve those goals. We will frequently evaluate progress toward these goals, looking back at the time you began therapy as a place for comparison.

In working to achieve the potential benefits of therapy, the process will require that firm and committed efforts be made on your part to change thoughts, feelings, and interactions that may be getting in the way of you living the life you desire. As a result, you may experience significant discomfort initially, and this is to be expected. Changes such as these involve flexing personal resources that may not have been used in quite some time. Seeking to resolve issues between family members, relational partners, and others may lead to relationship changes you did not anticipate or originally intend. Remaining open to new experiences and possibilities can lessen these potentially negative effects.

An important factor in determining the success of your therapeutic efforts lies in the amount of energy and attention you give to your issues outside of the therapy office. It is not unusual for us to ask that you complete specific assignments on your own between sessions as an integral part of the therapeutic process. As a major part of this therapeutic agreement, we are asking you to commit to attempting these assignments to the best of your ability, and your signature below attests to your willingness to do so.

THE THERAPEUTIC RELATIONSHIP

Your determination to explore the possibility of entering into therapy for personal and relationship issues is a process that is deserving of thoughtful consideration on both your part as well as ours. In an effort to provide you with information you may need to make your decision, your initial visit is available at no charge. This allows you to meet us with no financial obligations, and to determine if this is the right place for you. As therapy is a very personal experience built upon mutual trust and respect between the client and the therapist, our mutual sense of compatibility is an essential element of a successful therapeutic relationship. Therefore, if at the conclusion of our initial visit, you do not feel this is the appropriate environment for you, we will be happy to assist you in finding a more suitable place and therapist.

LENGTH OF THERAPY

Therapy sessions are initially scheduled on a weekly basis lasting approximately one hour each. It is almost impossible to predict how many sessions it will take in order for you to complete your therapeutic process. It is our belief that you will know when therapy has served its purpose for you. Some clients prefer to address a specific issue and then to conclude therapy. Others prefer to maintain an on-going therapeutic relationship once the original issue has been resolved. We will check with you periodically regarding your perceived value in continuing therapy. You can trust that we will focus our efforts effectively and efficiently during our sessions so that we may maximize our therapeutic time together.

FOLLOW UP

A part of our continual commitment to the therapeutic process is to follow up with our clients at specific intervals once regularly scheduled therapy sessions are deemed no longer necessary. Typically these follow up contacts are scheduled three (3) months, six (6) months, and one (1) year after the discontinuation of sessions. Please indicate your willingness to allow us to contact you by checking the appropriate boxes below:

- I prefer NOT to receive any follow up contact.
- I agree to receive follow up contact via telephone _____
and/or email _____.

YOUR RIGHTS AS A CLIENT

As a client of Intentional Living you are entitled to certain consumer rights which include:

1. The right to ask questions about any process or techniques used during therapy.
2. The right to end therapy at any time without any moral, legal, or financial liabilities, other than those already incurred.
3. The right to review your records at any time.
4. The right to file a complaint if our services fail to conform to our professional code of ethics or licensing laws. In order to file a complaint with the Texas State Board of Examiners of Marriage and Family Therapists, you may notify the Consumer Complaints Hotline at 1-800- 942-5540.
5. The right to have your anonymity as a client of Intentional Living protected at all times. To that end, we will *never* initiate interaction with you in a public setting. However, you are welcome to initiate interaction with us to which we will happily respond.

GUIDELINES FOR OUR HOME-BASED THERAPY OFFICES

We appreciate the opportunity to share our facilities with you. Providing services out of a home-based office presents some distinctive differences as compared to an office located in a business or medical setting. We will do everything we can to make your visit comfortable and conducive for your therapeutic work with us.

Our promise to you:

1. To preserve your confidential identity, we will NEVER have family or friends visiting during our office hours.
2. Except for emergencies, we will not schedule service or maintenance work during our office hours.

3. We will continue to keep all client records either physically or electronically secure and safe from unauthorized viewing or utilization.
4. For your safety and the safety of your records we will maintain a monitored security system of our facilities.

What we ask of you:

1. Due to the absence of a reception room, we ask that you arrive no more than five (5) minutes early for your appointment in order to allow the clients(s) ahead of you ample time to leave. Please don't ring the doorbell; instead, come in the front door and go directly to your therapist's office.
2. In order to maintain a boundary between our professional and personal facilities, we ask that you not enter any other portion of our home via a closed door. Restroom facilities are available so please don't hesitate to ask.
3. In order for us to maintain a balance between our professional and our more private, personal lives, we ask that you not visit our home except during your scheduled appointment time. If you feel you are in a crisis and must speak with one of us immediately, please call our office telephone number, 794-1336, and follow the instructions for notifying us via our emergency cell phone.

FEES

Charges for Therapeutic Services - Therapy sessions, whether conducted face-to-face or via telephone, are typically scheduled in one-hour increments. Our fee is \$120.00 per hour for individual and couple therapy working with one of us as your therapist. If you choose to work with both of us as a co-therapist team, the fee is \$200.00 per hour. Longer sessions are prorated from these fees. Because session-scheduling is based on one-hour increments, we are not able to offer adjustments for sessions ending prematurely. Any phone consultation lasting 30 minutes or more will be charged at these same rates. Court-ordered sessions, court appearances, and written reports will be charged at the rate of \$200.00 per hour.

Payment Method – Due, in part, to the increased demands of health insurance companies, and in an effort to maintain strict confidentiality of our clients' personal information, we no longer participate as providers of mental health services for any insurance plan. Consequently, we must ask that full payment for all services rendered is required at the time services are received. Payment may be made by cash, a check made payable to **Intentional Living**, or by Master Card, Visa, or Discover credit cards. Should you choose to file a claim with your health insurance provider for partial reimbursement to you for the services you received from **Intentional Living**, we can provide you with the required diagnostic information.

Cancellation Policy – Unlike many medical offices who often times “double book” their patients in order to accommodate for those who “no show” without notice, we schedule only one client per hour for therapy. If you are unable to keep an appointment, we ask that you please notify us immediately so that we can offer your appointment time to another client who may be on a wait list. Except in the event of circumstances beyond your control, if you miss your appointment or do not cancel it with 24 hours prior notice, you will be billed for the session you missed.

EMERGENCIES

Should you feel you must contact us in the event of an emergency you may call our emergency notification number directly by dialing 806-787-2812 for instructions. Your call will be returned immediately or upon the conclusion of any on-going therapy session we may be conducting. We will always make arrangements for a professional colleague to be available for such calls in the event we are unavailable.

CONFIDENTIALITY

At Intentional Living, we are ethically and legally bound to maintain strict client confidentiality. Consequently, we will not provide any person or agency any information from therapy sessions without signed written permission by the client, or if served with a legally binding subpoena for such information. However, we are required by the State of Texas legal statutes to report any **suspicion** of sexual and/or physical abuse of children or the elderly; and any threats of death or bodily harm made by anyone attending a therapy session toward their self or another person or agency.

CONSENT

I voluntarily consent to receive therapeutic services from the staff of **Intentional Living**. I understand that services will be provided by marriage and family therapists licensed by the Texas State Board of Examiners of Marriage and Family Therapists.

I understand that this consent to services will be valid and remain in effect as long as I am a client of **Intentional Living** unless revoked by me in writing.

If I have any questions or concerns now or in the future, I understand that I should consult with my therapist.

I certify that this form, including the statements on the limits of confidentiality, has been fully explained to me, that I have read it or had it read to me, and that I understand its contents.

I agree to pay for all services received by **Intentional Living** according to the terms of this agreement.

I understand my rights and responsibilities as a client of **Intentional Living**.

SIGNED COPY IS ON FILE