Informed Consent

Psychological Services:

Welcome. While I cannot assure you of success, I can tell you that psychotherapy has benefitted many people who have undertaken it with sincerity and commitment. Our first few sessions will involve an evaluation of your needs, the setting of goals, and a treatment plan. We will both be evaluating whether or not we can work together well. At any time during the course of our work together, I will be pleased to provide you with information about my professional methods, techniques, and interventions. After our first few sessions, I may be able to judge approximately how long your psychotherapy should take. Feel free to ask questions at any time. As we work together, from time to time we will evaluate the effectiveness of your therapy including using your and my observations, any recordkeeping you are asked to do, and various assessment instruments. My sessions generally start on the hour and last from 50-60 minutes. I will wait 15 minutes for your arrival to a session without hearing from you before I may leave. I do sometimes run late starting sessions due to differing circumstances that may include the demands in a session preceding yours. Please ring the doorbell when you arrive.

Some Risks:

- For some people, psychotherapy may involve emotional intensity or discomfort.
- Therapy can disrupt current relationships some relationships will evolve as changes and insight develop whereas others may end.
- It is also possible that positive and negative feelings may develop for the therapist that are confusing, and those feelings arise from the unique relationship between therapist and client. Those feelings are normal and important to discuss in session. Feel free to discuss any feelings you may have with me.

My Qualifications:

| Education: | University | y of | Color | ado at | t Col | lorad | o Springs, | Colorad | o Springs, (| Colorado | 1998 |
|------------|------------|------|-------|--------|-------|-------|------------|---------|--------------|----------|------|
| | | | | | _ | | | | | | |

Degree: Bachelor of Arts, Psychology

University of Colorado at Colorado Springs, Colorado Springs, Colorado 2001

Degree: Master of Arts, Psychology

Colorado Springs School of Professional Psychology (now University of the 2009)

Rockies), Colorado Springs, Colorado

Degree: Doctor of Psychology (PsyD), Clinical Psychology

Certifications: Eye Movement Desensitization Reprocessing Therapy

Cognitive Processing Therapy Prolonged Exposure Therapy

Client's Rights:

As my client, you have the right to:

Confidentiality

- State law and professional ethics protect the confidential nature of the therapeutic relationship. Without your consent, I will not share with others what you tell me. You should be aware that I do not employ an answering or billing service; however, my business account is managed by a retired Air Force Dentist who is trained and compliant in medical confidentiality and HIPPAA policies. He does not have access to your treatment records. Exceptions to this imperative to maintain confidentiality are mandated by state law which requires that I report or intervene in these circumstances:
 - > You intend to seriously harm yourself.
 - > You intend to seriously harm others.
 - You engage or participate in abuse or neglect of a minor.
 - You engage or participate in abuse or neglect of an elder.
 - ➤ You engage or participate in abuse or neglect of an at-risk adult (one who is disabled in some way).
 - Court order compels me, although every legal effort will be made to maintain your confidentiality.
 - You plan to commit a crime.
 - Sexual abuse of a child which has no time limit for reporting.

• Continuance in therapy

You can count on continuing in therapy unless one or more of the following circumstances occur:

- a. You fail to appear for appointments without canceling on 3 consecutive occasions.*
- b. You do not appear for an appointment for at least 30 days.*
- c. You attempt to take your own life or will not follow guidance designed to ensure your safety such as entering into a contract for safety for a specified period or removing access to means to carry out plans for suicide.
- d. We, together, decide that you are not making progress or benefitting from therapy.

*At that time, your file will be closed. You are welcome to return at any time; however, it may be necessary for you to see another provider if I have a full case load and cannot accommodate you.

• Treatment Summary

• You may get a written summary of your treatment with me if you wish.

Grievance

• Sexual intimacy between a client and therapist is not part of any recognized therapy. Should it or any other behavior on my part occur about which you have questions

that you feel you are not comfortable discussing with me, you have the right to consult the Colorado Department of Regulatory Agencies, Board of Examiners in Psychology (303) 894-7800.

Emergency:

This practice is a sole provider practice rather than a clinic and is not equipped as a crisis center. In cases of emergency, call 911 for help or proceed immediately to the nearest Emergency Room if you feel you are at imminent risk of doing harm to yourself or another. Please let me know if you take these steps. You may also choose to call a crisis hotline before taking these steps.

- ➤ Pikes Peak Crisis Hotline 844.493.8255
- ➤ Pikes Peak Mental Health 719.635.7000
- Peak View 719.444.8484
- Military One Source 800.342.9647

Aspen Pointe (now Diversus Health) has a walk-in crisis help center at 115 South Park Drive in Colorado Springs.

As my client, you have been provided with a Distress Plan to complete that includes the information just given along with preliminary steps to try and calm your distress. When the intensity of distress rises beyond a certain point, our ability to remember coping strategies becomes impaired and it becomes difficult to remember all of the self-soothing strategies we know. The plan you complete is intended to be a step-by-step process to lower your distress without you being required to recall everything on your list: It is a potential resource. You should keep a copy of that plan in a place you can always easily reach it and attempt to follow those steps, if you can. A copy of that plan form, should you lose yours, is available on my website at www.intentionalenrichment.com under the "Distress Plan" tab. Please bring a copy of your completed plan to me.

Out of Session Contact:

In today's world, the opportunities for contact have broadened to include avenues unimagined just a few decades ago. These methods have encouraged us to seek expect immediacy and loosening of restrictions regarding day and time. For clarity's sake, I have some policies about out-of-session contact, including by text and e-mail.

Please remember that my practice is not structured for crisis support. On this form, on your Distress Plan, and on my website home page are hotline numbers and emergency walk-in services available to you if you are in acute distress and fear you might harm yourself or anyone else.

• Email. I restrict email contact to people who are considering whether to embark on therapy with me. Email is non-secure. I believe a risk to your confidentiality and privacy exists. That risk to you as my client is unacceptable to me. Therefore, if I am engaged in therapy with you, I will not respond to any emails and discourage you from contacting me by that

method. I encourage you instead to accept my invitation to join me on iCouch.me, to which I will send an invitation, and communicate with me by that secure, HIPPA compliant site.

- Telephone. I will generally check my voice mail messages between 9:00 and 11:00 a.m. on Monday through Thursday. I do not generally check my voice mail messages after 5:00 p.m., or on Friday, Saturday, Sunday, or on holidays. If you call after I check messages on Thursday, I will not receive your message until Monday morning. In that case, you may not hear from me until Tuesday morning or Wednesday if Monday was a holiday. I will return your call as soon as I can upon receiving your message, but no later than 24 hours after I receive your message.
- Text. Without express agreement between us, please do not send text messages. They are non-secure and not reliable we' ve all had incidents where texts sent were not received in a timely manner or at all due to dead spots, glitches, or disruptions in service. For this reason, I ask that you exclude text messages as a way of reaching me. Notification of running late, last minute cancellations due to weather or illness, and other information and questions should be by telephone contact or voice mail message. I will, however, send a text to you if I am unavailable at the last minute due to illness or injury, or if weather and driving conditions are unsafe.
- Unexpected Encounters. It is very possible that we will unexpectedly meet each other away from my office. In that case, to protect your privacy and confidentiality, I will not greet you. You are entirely welcome to approach me, and I will be delighted to see you. The decision to publicly acknowledge that you know me must rest in your hands.

Client's Responsibilities:

As a client you have the following responsibilities:

- Cancel an appointment at least 24 hours beforehand by calling (719)600-8468.
- Pay fees as agreed.
- Fulfill any therapy homework to which you agree.

I have read and understand the above information. I agree to the stated conditions.

| Signature of Client or Guardian | Date |
|---------------------------------|------|
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| Signature of Therapist | Date |