

OFFICE POLICY

This statement is required by the Washington State Licensing Department as a means of answering any questions or expectations you may have about my practice as a counselor.

Services

I provide individual and group therapy. I offer both short and long term treatment. An average length for short-term treatment is 1 to 6 sessions. Longer treatment may extend from 6 months to 1 year, or more depending on the degree of change you seek. You and I will regularly assess your progress and will modify treatment accordingly. I am a solo practitioner. However, I share office space and consumables with other independent practitioners.

Treatment Approach

Within the method of the "talking cure," I listen, reflect, and interpret in an effort to bring awareness to the unconscious implications of what is being said. I hope to create an environment where clients are promoted to problem-solve, cope, *and* alleviate suffering in addition to making self-discoveries. I hold the client and the therapist equally responsible for the outcome of therapy. It is the therapist's responsibility to offer a structure which can "contain" what the client brings. It is the client's responsibility to use the structure to their benefit. The success of your therapy will rest largely on your openness, honesty, active participation and commitment to change.

Psychotherapy can involve remembering unpleasant events and can arouse intense emotions. You may experience various feelings including, but not limited to anxiety, sadness, frustration, anger, and shame. *Having* these feelings, and *talking* about them can lead you to desired change.

Theoretical orientations from which I direct my treatment include Psychodynamic, Strength based, Motivational Interviewing and Gestalt.

Appointments

Our appointments are 53 minutes long. If you can't keep your appointment, please let me know as soon as possible. 24 hours notice is requested for cancellation/ rescheduling or you'll be charged the full session amount.

Fees

The fee for the first session is \$180. After that, session fees are: regular office visit (53 minutes): \$180, extended office visit (83 minutes): \$280. Group fees are \$50/week. Phone consultations are prorated. Less than 15 minutes is free, 15 minutes: \$45, 30 minutes: \$90, 45 minutes: \$135 and 60 minutes: \$180. Report writing is billed at \$225/hour (1 hour minimum).

I do not accept insurance, but am an out-of-network provider with most providers. Payment is due at the time of service. Please be prepared to pay for therapy at the beginning of the session, so therapy time is not used for this purpose. I accept credit cards, cash and check.

Charges will be made for extended telephone consultations, contacts with others regarding your treatment, letter/report writing, or other activities with your written consent. Payments that are more than 30 days past due will be charged 1.5% until paid in full. There will be a \$35 fee for NSF checks.

Experience

I have a Master of Arts degree in Psychology from Antioch University, Seattle and am licensed in the state of Washington (#LH00008395). This complies with the WAC code 246-810-031 which says, "Counselors practicing counseling for a fee must be registered or licensed with the department of health for the protection of the public health and safety. Registration of an individual with the department does not include a recognition of any practice standards, nor necessarily imply the effectiveness of any treatment."

I specialize in sexual issues, although once therapy is underway, it is not limited to these issues. Additional areas of focus are likely to be out-of-control sexual behavior ("sex addiction"), erotic conflicts, general sex therapy, relationship concerns, mood disorders and other concerns.

Confidentiality

All issues discussed are strictly confidential. However, the law requires the release of confidential information in four situations: 1) potential suicidal behavior, 2) threatened harm to another person, 3) suspected neglect or abuse of a child, dependent adult or developmentally disabled person, or 4) a court subpoena. Any such release would be discussed with you in advance.

Grievances

As a Washington state licensed counselor, I am accountable for my work with you. If you have concerns about our work together, please discuss them with me. If you want more information about the law regulating counselors or hypnotherapists, you may contact the Washington State Department of Licensing, P.O. Box 9649, Olympia, WA 98504. Or you may call (360) 236-7400 Monday-Friday, 8:00 a.m. to 5:00 p.m.

Termination of Treatment

You can terminate your treatment at any time. If you are unhappy with your treatment, please discuss your concerns with me and I will gladly help you make contact with another therapist who uses a different approach or style.

I have been provided a copy of this office policy /disclosure statement and I hereby consent to treatment and agree to the terms outlined above.

Printed name: _____ Phone number: _____

(Client's signature) (Today's date)

(Therapist's signature) (Today's date)