Informed Consent/Client Agreement

Services Offered:

Counseling services are offered on an appointment only basis. There are many different definitions and philosophies of counseling, and unique approaches to treatment in connection with your goals, desires, and preferences. Counseling is about growth. A goal of therapy is to become more functional and congruent with an individual’s life and environment. During the first few stages, an understanding of the process and a beginning awareness starts to take place. During intermediate stages of counseling, initial awareness and understanding progress to an active status and old patterns begin to be replaced with healthy responses or behaviors while negative emotions decrease. The final stages of therapy result in growth and an internal strength from within after facing certain issues or getting past hurt feelings.

Therapy can change a person’s insight and awareness. It will take effort as well as participation on your part and what is expected is to be open and truthful. I may talk about unpleasant events which may cause you discomfort and I may challenge some of your ways of thinking. The purpose of counseling is to gain insight and the outcome will depend on you. I also authorize that if treatment is for a minor, I give permission to treat my child.

Initial Here

Confidentially:

Oklahoma State Law requires that information provided to mental health practitioners remain confidential, and Embrace Life Counseling, LLC will make every effort to ensure confidentiality is maintained with respect to all aspects of your treatment. As a client, you agree to the following exceptions to confidentiality, in which case information may be disclosed to the appropriate authorities/agencies/individuals.

- If the therapist has reason to believe that you may harm yourself or others.
- If the therapist has reason to believe that you are involved in or have knowledge of abuse or neglect of a child, or abuse, neglect of a person who is elderly or has a disability.
- Ordered disclosure by state or federal courts.
- HEALTH INSURANCE & CONFIDENTIALITY OF RECORDS: Disclosure of confidential information may be required by your health insurance carrier or other third-party payer in order to process the claims. Only the minimum necessary information will be communicated to the carrier.

In addition, Embrace Life Counseling, LLC requires disclosure of information in the following circumstances:

A signed release form granting permission to designated third parties to receive information (as needed.) In the case of minors, parents or legal guardians have access to their child’s records, unless emancipated. In the rare case that emails or text messages are exchanged between therapist and client with therapy related discussions, confidentiality is not guaranteed but will be protected to the best of the therapist’s
ability. The therapist reserves the right to transfer/terminate services at any time, for any reason they consider therapeutically appropriate.

Initial Here________

**Treatment Approaches/Theories**

I am likely to use several psychological theories/treatment. These may be: behavioral, cognitive-behavioral, cognitive, existential, realist, system/family, developmental (adult, child, family), humanistic or psycho-educational. I do not prescribe drugs.

EMDR (Eye Movement Desensitization and Reprocessing) is a treatment approach that is mainly used for a history of trauma that may include PTSD, triggers, anxiety, depression and has been scientifically proven for treatment of all ages to relieve psychological stress. I may use eye process movements or biofeedback using headphones. If you have any questions about this specific, highly effective treatment that I am fully trained in, please do not hesitate to ask me. Please note this is used to help unlock traumatic memories or other adverse life experiences to bring a resolution. If you agree to this approach please initial on the blank provided.

Initial Here ____________

**Therapeutic Relationship**

The relationship between therapist and client is the container through which client change can take place. As such, it is often one in which close emotional bonds develop. It is also a professional relationship, in which appropriate boundaries must be maintained. For the most part the therapeutic relationship begins and ends at the therapy office. Although it is sometimes difficult to understand, it is a necessary requirement for maintaining the therapeutic environment. As such, I cannot be expected to be involved in a social relationship or friendship of any kind that exists outside of the therapy room and I do not accept friend requests on social media. I may conduct a web search on my clients before the beginning of therapy or during therapy. If you have concerns or questions regarding this, please discuss them with me. If you or your child are involved in a court case, I may look up the status of the case online.

**Termination of Therapy**

I reserve the right to end treatment at my discretion. Reasons for termination include, but not limited to: untimely payment of fees, failure to comply with treatment recommendations, conflicts of interest, failure to participate in therapy, the clients scope of needs are outside the therapist’s competence in that area or the client is not making adequate progress. The client or parents if the client is a minor, have the right to terminate therapy at their discretion. I will attempt to ensure a smooth transition to another therapist by offering referrals to the client.
**Grievance/Complaint**

I understand, that I have the right to file a confidential grievance if I have an unresolved concern regarding my therapy. Any grievance can be written in form and addressed to:

*Embrace Life Counseling, LLC*

*10306 N 138th East Avenue Suite 206*

*Owasso, OK 74055*

**Court Testimony**

The goal of therapy is to reduce stress and conflict. By initialing below, you are agreeing not to involve me in legal proceeding or attempt to obtain treatment records for legal or court proceedings. I cannot make decisions or recommendations in court custody cases. I maintain a non-bias approach for each of my clients and will do so in a court testimony. In the event that I’m required to provide treatment records or testimony in any legal proceeding, you will be charged $150 per hour for any preparation time and file review. If subpoenaed to appear in court, a retainer fee of $750 will need to be paid in full to Embrace Life Counseling, LLC 7 days in advance of the scheduled court date. You will also be charged $150 per hour of time that I spend being “on call” to testify, traveling to and from court/deposition, waiting to appear, and/or testifying. If court is cancelled within 48 hours, you will receive a refund of the unused portion of your retainer. Any written report or correspondence sent out is charged at the rate of $150 per hour.

**Initial Here __________**

**After hours Policy& Procedure:**

Since I have two different offices I work out of, if you need to contact me at any time, you may do so by leaving a message on the confidential voicemail at: 918-520-1202. If you are in crisis, please call the 24 hour crisis hotline at 1-800-522-9054 or COPES Hotline at 918-744-4800 or 911. Embrace Life Counseling, LLC is not a crisis facility and will not be held responsible for any damages occurring as a result of unmet crisis or acute care needs. I may not be available to respond to emergency situations. Embrace Life Counseling, LLC is also not responsible for the injury or death of a client or clients family member during treatment or on the property of Embrace Life Counseling, LLC.

I have read and received a copy of Embrace Life Counseling, LLC client agreement and informed consent. I had an opportunity to ask questions about the agreement/informed consent before signing. I have read the above information and understand and agree to comply with them:

Client_____________________________________________________Date___________________

Parent/Legal Guardian_______________________________________Date____________________