

Information Disclosure and Informed Consent Form

This form is designed to answer some frequently asked questions about Refuge Counseling Center LLC and your specific counselor/provider at the Center. Please read and sign this form in order to indicate your understanding of office procedures as well as your willingness to abide by these policies. Upon request, you will receive a copy of this form so you can refer to it later.

Welcome to counseling with Alaina Henry MA, LPC, NCC
Office location: Refuge Counseling Center LLC
4144 E. Amity Ave, Nampa, ID. 83687 208-465-4985
alaina@refugecounseling.com

About my Counselor: I recently moved from Oregon to Idaho and am currently in the process of transferring my licensure. Due to this transfer, I am currently practicing as an intern in the state of Idaho until everything is settled. I hold a Masters in Clinical and Mental Health Counseling from George Fox University and a double Bachelors in Communication and Biblical Studies/Theology from Multnomah University. As an intern offering clinical services, I align with the mission and vision of Refuge Counseling Center and have ethical and legal responsibilities. I fully abide by the Ethical Principles of the American Counseling Association and the American Association of Christian Counselors.

My experience encompasses working with people of all ages and stages including running a private practice in Portland, working for the Washington County mobile response crisis team, and working as a child and family therapist for a non-profit organization.

I approach therapy as an addition to a toolbox of resources that helps in difficult times, manages complex situations more confidently, and celebrates the richness that life can offer. It is an honor to come alongside someone and be allowed to walk with them on life's journey as they manage, maintain, and find meaning out of life, however complicated that may look.

Client agreement: I understand that I am entering into a counseling process with an intern who has completed an accredited masters level program in counseling and is finalizing licensure. Dori Halbert M.Ed, LCPC is my direct on-site supervisor. Dori Halbert is the director of the center and is a registered counseling supervisor in the state of Idaho. By signing this contract you agree to the oversight of your counseling process and clinical files by the intern's supervisor. Supervisors are bound to the ethical and legal guidelines of confidentiality that protect your personal health information as described in the Notice of Privacy Practices.

The Process of Counseling, Evaluation & Scope of Practice

Participation in counseling can result in a number of benefits to you, including improving interpersonal relationships and resolution of the specific concerns that led you to seek counseling. Working towards these benefits, however, requires effort on your part. Counseling requires your very active involvement, honesty, and openness in order to change your thoughts, feelings and/or behavior. As your counselor, I will ask for your feedback and views on your counseling, its progress, and other aspects of the therapy, and will expect you to respond openly and honestly. Sometimes more than one treatment approach can be helpful in dealing with certain situations.

There are also risks involved in counseling. In your evaluation or counseling process, remembering or talking about unpleasant events, feelings, or thoughts can result in you experiencing anxiety, depression, insomnia, etc. I may challenge some of your assumptions or perceptions or propose different ways of looking at, thinking about, or handling situations, which can cause you to feel upset, angry, depressed, challenged or disappointed. Attempting to resolve issues that brought you to therapy in the first place, such as personal or interpersonal relationships, may result in changes that were not originally intended. Psychotherapy may result in decisions about changing behaviors, employment, substance use, schooling, housing, or relationships. Sometimes a decision that is positive for one family member is viewed quite negatively by another family member. Change will sometimes be easy and swift, but more often it will be slow and maybe even frustrating. There is no guarantee that counseling/therapy will yield positive or intended results.

During the course of counseling, I am likely to draw on various psychotherapeutic theories and evidence based treatment approaches according, in part, to the problem that is being presented and/or per the specific diagnoses being treated. These approaches include, but are not limited to, person-centered, cognitive behavioral, attachment, emotion-focused, existential, developmental (adult, child, family), relational/interpersonal, and psycho-educational. As part of my holistic treatment approach I will cooperate with you to explore areas of your spirituality, cognitive processing, emotional processing, and behavioral patterns that affect your lifestyle, relationships and overall wellbeing in order to assist you in reaching your goals.

I do not provide custody evaluation recommendations, medication or prescription recommendations. I do not provide legal advice or expert opinions on divorce or custody matters. I do not provide specific spiritual advice. These activities do not fall within my scope of practice.

Litigation Limitation

Due to the nature of the therapeutic process and the fact that it often involves making a full disclosure with regard to many matters which may be of a confidential nature, it is agreed that, should there be legal proceedings (such as, but not limited to divorce and custody disputes, injuries, lawsuits, etc.), neither you nor your attorney(s), nor anyone else acting on your behalf will call on Alaina Henry, MA, Counseling Intern, nor the Supervisor Dori Halbert, M.Ed, LCPC, nor Refuge Counseling Center or any of my business associates or affiliates to testify in court or at any other proceeding, nor will a disclosure of the psychotherapy records be requested unless otherwise agreed upon.

Unattended Children

Please note that the office does not allow and are not responsible for unattended children in the waiting area. Please also note that it is usually not an appropriate setting for children to be present in a counseling session when she/he is not the client.

Treatment Plans

Within a reasonable period of time after the initiation of counseling treatment, I will talk with you about my working understanding of the problem, treatment plan, therapeutic objectives, and my view of possible outcomes of treatment. It is important that you consider this information along with your own opinions of whether you feel comfortable working with me. Counseling involves a commitment of time, money and energy, and you have the right to determine if I am a good fit for you. If you have questions or doubts about the counseling process or it's effectiveness we should discuss these matters whenever they arise. If your doubts persists, I will be happy to help you set up a meeting with another mental health professional for second opinion and/or to transfer your services to them.

Meetings and Cancellations

I will usually schedule one 50-minute session (this is considered an appointment hour) per week at an agreed upon time within my scheduling hours. We may determine to do longer sessions, or more/less frequent sessions. You will be billed per appointment hour utilized in the event that we agree for a session time to go longer than expected.

As an office policy, once an appointment hour is scheduled, **you will be expected to pay for it unless you provide 24-hours advance notice of the cancellation** (voicemail or email notices are permitted).

Fees, Billing Options, and PHI

Payment is due at the time of service, you or a guardian, if a minor, agree to be responsible for payment. **Fees are \$60.00** per one 50-minute session (appointment hour). Payment can be made in **Cash, Master/Visa Card, or Check payable to my contracting office "Refuge Counseling Center LLC."** If your check is returned you are responsible for the full amount of the service fee plus any additional fees the Center may require.

Additional Service Fee: A fee of \$200.00 per hour is charged for additional services beyond the regular 50-minute session (appointment hour) this includes but is not limited to activities such as court appearance, report reading and/or writing time, phone calls, treatment teaming with other providers that exceeds 20 minutes in a business week or is otherwise determined excessive by your student intern or their supervisor.

Invoices/Payment Arrangements: You may also pay your fees at the end of the month if you make arrangements to do so ahead of time. You will be sent an invoice at the end of the month, mailed to the address listed on your intake form, upon request or for accounts overdue. Payment is due within 30 of the invoice date. Please let us know if there is difficulty in making your payment so we can make a payment plan with you. Remember our fees average to be 50% lower than market value as it is the mission of the Center to offer tailored and high quality professional services at an *affordable rate* meant for out-of-pocket payment. As indicated in our Notice of Privacy Practice we may use your protected health information for other payment reasons such as—collections agency, small claims court, or business associates whom process claims and payments for us.

Third Party Pay: ***As a service to clients we may consider sending an invoice for payment to a requested third party that you indicate (non-insurance- such as parent of an adult client, church, family member, etc.)*** It is an office policy for you to read and sign a "Billing Release Form" for invoices sent to any third party you request for the Center to bill. Your counselor must agree to this arrangement as well. If the Center has not received payment within 30 days you as the client/guardian are still considered the responsible party for payment and you will be billed and expected to pay the amount in full within 60 days of the original invoice date.

Insurance and Confidentiality of Protected Health Information: The Center **DOES NOT BILL INSURANCE or other such mental health benefit plans.** Because you are entering into a counseling relationship with a student-intern your fees cannot be reimbursed by insurance or any other mental health benefit. The supervisor, as a licensed counselor, oversees your services but does not provide them to you herself and you cannot try to seek reimbursement from your insurance under her information.

Confidentiality and Records

All information disclosed within sessions and the written records pertaining to those sessions are confidential and may not be revealed to anyone without your written permission except when disclosure is required by law or are within the privacy practices of the Center. In general, conversation and the information contained in your counseling records are confidential with the exception of the following reasons in which confidentiality may be broken (see also the Notice of Privacy Practices):

- 1) When there is actual suspected abuse and/or neglect of a child/elder.

- 2) When there is reason to believe that the client may harm himself/herself or someone else.
- 3) When legal proceedings are required to settle this account, in which case some identifying information would be released to a lawyer, collection agency, or small claims court.
- 4) When the court subpoenas record

I follow Idaho state law, the ACA and AAACC professional organization ethical codes of conduct and the rules, regulations, policies and procedures of the Center and my graduate level masters program as a student intern. I follow the Notice of Privacy Practices of the Center. Your signed acknowledgment of this notice is required to initiate counseling with me at the Center.

I will consult regularly with my supervisor regarding your case. I may also occasionally find it helpful to consult with other professionals about a case. This is deemed ethical and appropriate professional practice as it promotes the quality of care and best standards of practice in the counseling I provide you. During a consultation, I make every effort to avoid revealing the identity of a client. *Anyone I consult with is also legally bound to keep information confidential.* If you do not object, I will not tell you about these consultations unless I feel that it is important to our work together.

In couple and family counseling, or when different family members are seen individually, even over a period of time, confidentiality and privilege do not apply between the couple or among family members, unless otherwise agreed upon. As your student-intern counselor I will use my best clinical judgment when revealing such information.

Children as Clients

It is my goal as your child's (minor) counseling intern to consult with you on a regular basis, and to involve you in your child's therapy as needed. At times, it might be necessary to end a session early. For this reason, it is the policy of the Center that a responsible adult be present in the office while the child/minor is attending their counseling session. Therefore, a parent, legal guardians, foster parents, step-parent, or other adult **MUST** stay in the waiting room while the counseling sessions are being provided. The student intern may make exceptions if the minor is an adolescent old enough to transport him/herself to and from counseling.

Mediation and Arbitration

All disputes arising out of, or in relation to, this agreement to provide counseling intern level counseling services shall first be referred to mediation, before, and as a precondition of, the initiation of arbitration. The mediator shall be a neutral third party chosen by agreement of the counseling intern and the supervisor at Refuge Counseling Center LLC and the client(s). The cost of such mediation, if any, shall be split equally, unless otherwise agreed upon. In the event that mediation is unsuccessful, any unresolved controversy related to this agreement should be submitted to and settled by binding arbitration in Canyon County, Idaho in accordance with the rules of the American Arbitration Association which are in effect at the time the demand for arbitration is filed. Notwithstanding the foregoing, in the event that your account is overdue (unpaid) and there is no agreement on a payment plan, Refuge Counseling Center LLC can use legal means (court, collection agency, etc.) to obtain payment. The prevailing party in arbitration or collection proceedings shall be entitled to recover a reasonable sum and for attorney's fees. In the case of arbitration, the arbitrator will determine that sum.

Dual Relationship

Despite a popular perception, not all dual or multiple relationships are unethical or avoidable. Therapy never involves sexual or any other dual relationship that impairs your counselor's objectivity, clinical judgment or can be exploitative in nature. Your counselor will assess carefully before entering into a non-sexual and non-exploitative dual relationship with clients. It is important to realize that in

some communities, particularly small towns, military bases, university campuses, church/religious communities, multiple relationships are either unavoidable or expected. Your counselor will never acknowledge working with anyone without his/her written permission. Many clients have chosen their counselor because they knew him/her before they entered therapy with him/her, and/or are personally aware of his/her quality of work for their level of service as a student intern. Nevertheless, your counselor will discuss with you the often-existing complexities, potential benefits and difficulties that may be involved in dual or multiple relationships. Dual or multiple relationships can enhance trust and therapeutic effectiveness but can also detract from it and often it is impossible to know which ahead of time. It is your responsibility to advise your counselor if the dual or multiple relationships become uncomfortable for you in any way. Your counselor will always listen carefully and respond to your feedback and will discontinue the dual relationship if she/he finds it interfering with the effectiveness of the therapy/counseling or your welfare and, of course, you can do the same at any time.

Records

Both the law and standards of the counseling profession require that I keep treatment records. I will develop and maintain a clinical medical record file on your case, which is property of and “owned” by Refuge Counseling Center LLC. You have the right to request information in your record and may contact Refuge to do so. Any request for information must be done in writing on an authorized form. If you are interested in reviewing the contents of your file, I suggest we discuss them together as they are professionally written and can be easily misinterpreted. I can also share them in summary format (either verbally or in written form). It is important to note that records will not be released to any outside party unless there is authorization by ALL parties who were part of the family therapy, couple therapy or other treatment that involved more than one client (such as group counseling). In the event of my termination, death or incapacitation please contact the Center for continuation of care assistance or record information.

Termination

Termination of the therapeutic relationship is inevitable. It should never be done casually and can be the most valuable part of the therapeutic process. Either party may terminate therapy if it is believed to be in the best interest of the client. Prior to termination, I suggest that a meeting be scheduled to discuss further recommendations.

Social Media/Networking

As a policy of the Center I do not accept friend requests from current or former clients on social networking sites, such as Facebook. I believe that adding clients as friends on these sites and/or communicating via such sites is likely to compromise their privacy and confidentiality. For this same reason, I request that clients do not communicate with me on any interactive or social networking websites.

E-mail/Electronic Communication/Electronic Devices

It is very important to be aware that computers and unencrypted email and e-fax communication can be relatively easily accessed by unauthorized people and hence can compromise the privacy and confidentiality of such communications. Emails, text, e-fax in particular are vulnerable to such unauthorized access. The Center computers, Fax Machine and other electronic devices authorized by the Center, such as your counselor's laptop, are secured and password protected. However emails and e-fax may not be. It is always a possibility that these communications can be sent erroneously to the wrong address and computers. You should not communicate any information with the Center, including your counselor, which you would not want to be included on a postcard that is sent through the Post Office. Also, be aware that phone messages are transcribed and sent to the Center or your counselor's email accordingly via unencrypted email. Please do not indicate our

authorization to use your email or other contact means on your Intake paperwork if you do not want to be communicated with in this way. If you indicate we can use your contact information on your intake or if you communicate confidential or private information via email, text, e-fax, or phone-message, we will assume that you have made an informed decision, and will view it as your agreement to take the risk that such communication may be intercepted, and we will honor your desire to communicate on such matters. Please do not use text, email, voicemail or faxes for emergencies.

Contact Information and Emergency

You may call the front desk at 465-4985 for scheduling or other basic information; this will be your most prompt reply. If you need to contact Alaina Henry between sessions, please leave a message and your call will be returned as soon as possible. Alaina is often not immediately available by telephone. If Alaina determines it appropriate she may have a staff member call to respond more readily to your inquiry. Alaina will make every effort to return your call within 24 hours Tuesday through Thursday with the exception of holidays and vacation time.

In case of an emergency please contact your primary care physician, call 911, Intermountain Hospital at 377-8400 or go to your local emergency room. Even if you call the Center or leave Alaina a message of any kind DO NOT wait for a returned phone call if you are experiencing a clinical emergency.

Client Responsibility

The client/guardian is responsible for the following: 1) Financial obligations outlined in this contract. 2) Following the policies of the Center. 3) Treating staff and fellow clients in a respectful, cordial manner in which their rights are not violated. 4) Providing accurate information about you. 5) Actively participating in your treatment process.

Authorization and Signatures

I have read the above Information Disclosure and Informed Consent, which includes the general policies of the Center (including 7 pages); I understand and agree to comply with them in receiving counseling/psychotherapy treatment with my counseling intern.

1- Client Name (Print): _____

Signature: _____

Date: _____

2- Client Name (Print): _____

Signature: _____

Date: _____

Parent/Guardian Name (Print): _____

Signature: _____

Date: _____

Counselor: Alaina Henry MA

Signature: _____

Date: _____