

Informed Consent to Treatment

I share this with you so you may make an informed choice to begin therapy.

I have an undergraduate degree in psychology from the University of Winnipeg and a masters degree in education (1998) from the University of Manitoba. I am a registered member of the B.C. Association of Clinical Counsellors (#2482) and provide individual and couple therapy with peer group consultation.

My approach to therapy is a collaborative one, whereby I recognize and honor that you are the expert on your life. I have trained in various therapeutic approaches, all of which are researched and presented extensively in the professional literature. Together, we explore the issues that you want help with and develop a plan to work together. As we go along, we will evaluate how things are going, and modify our plan as needed. We can change that plan at any time, and you can stop working with me at any time.

I assure you that I am aware how much courage it takes to make the decision to enter therapy, and want you to know that the pace of therapy will be guided by you. I will provide the space and safety for you to do the work that you have come to do.

Confidentiality:

All communications in therapy are confidential. I will not share any information with anyone unless I have your express written permission to do so. There are exceptions to that rule of confidentiality:

1. The requirement to prevent harm to clients themselves, or to someone else, should such plans be disclosed;
2. The requirement to report incidences of child abuse being perpetrated;
3. The requirement to comply with a court-ordered subpoena.

Access to Your Records:

I will keep a paper file on our work together. This record includes your intake information and my session notes. You have a right to access this information and obtain a copy of my records, if you wish, or may request the transfer of a copy of your file to any therapist or agency you choose. I do not store records electronically.

Addressing any Concerns About Your Treatment:

If you have concerns about how the therapy is progressing, please talk about your concerns with me. I would like you to understand that should you have a concern about the ethical workings of your therapist, you may pursue such concerns with the B.C. Association of Clinical Counsellors.

Telephone and/or Online Sessions:

Some therapy sessions may be provided by telephone or online, through video-conferencing. The video-conferencing service I use is OnCall Health (www.oncallhealth.ca), which is compliant with Canadian laws on privacy and with the B.C. Association of Clinical Counsellors guidelines for online therapy. Telephone sessions are conducted with the use of a wired-in landline, again in compliance with B.C. Association of Clinical Counsellors guidelines. You need to know there are inherent risks in on-line therapy. Although it rarely happens, there is a possibility your information is intercepted by unauthorized third parties using sophisticated tools. By signing this agreement, you accept these risks.

Fees:

For individual sessions, the therapy fee is \$110/hr plus gst, total \$115.50 payable by e-transfer to fran@talktofran.com, or by credit card authorized by telephone.

For couple sessions, the therapy fee is \$120/hr plus gst, total \$126.

You will be provided with a receipt at the end of each session. Should you, at any time during the course of our work together, find it difficult to meet the fee, please let me know.

Cancellation Policy:

It is your responsibility to inform the therapist with a minimum of 24 hours notice if a session is to be cancelled. There will be no charge for any appointments cancelled with at least 24 hours notice.

There will be a one-half charge for any appointments cancelled the same day as the appointment is scheduled, except in the case of an emergency.

There will be a full charge for not keeping an appointment and failing to cancel.

Please let me know if you have any questions or concerns before signing, so I can provide you with answers. If any questions arise later, please ask.

If you understand and accept the terms and conditions of Informed Consent, please sign and date below.

Client #1 Name: _____

Email address: _____

Telephone: _____

Date: _____

By typing OR signing my name below, I acknowledge that I have read and accept the terms of the Informed Consent above.

Signature: _____

Client #2 Name: _____

Email address: _____

Telephone: _____

Date: _____

By typing OR signing my name below, I acknowledge that I have read and accept the terms of the Informed Consent above.

Signature: _____