

INFORMATION FOR CLIENTS

Welcome to Three Strands Counseling Practice. I appreciate your giving me the opportunity to be of help to you. This packet answers some questions clients often ask about my therapy practice. It is important to me that you know how we will work together. I believe our work will be most helpful to you when you have a clear idea of what we are trying to do.

This packet talks about the following in a general way:

- What the risk and benefits of therapy are
- What the goals of therapy are, and what my methods of treatment are like
- How long therapy might take
- How much our services cost, and how money matters are handled
- Other areas of our relationship

After you read this packet we can discuss, in person, how these issues apply to your own situation. This packet is yours to keep and refer to later. Please read all of it and mark any parts that are not clear to you. Write down any questions you think of, and we will discuss them at our next meeting. When you have read and fully understood this packet, I will ask you to sign it at the end. I will sign it as well and make a copy, so we each have one.

ABOUT THERAPY

Because you will be putting a good deal of time, money and energy into therapy, you should choose a therapist carefully. I strongly believe you should feel comfortable with the therapist you choose, and hopeful about the therapy. When you feel this way, therapy is more likely to be very helpful to you. Let me describe how I see therapy.

The type of therapeutic approach I use is based on the Cognitive Behavioral Therapy model. Cognitive Behavioral therapies have been widely demonstrated to be effective in reducing depression and anxiety and to increase coping skills. Cognitive Behavioral Therapy (CBT) is based on the idea that our *thoughts* cause our feelings and our behaviors, not external events. We often believe that our feelings and behaviors are caused by what is happening in the real world. However, this is not quite true. When we have any kind of experience, it does not affect us directly. Rather, we first give it a meaning through our beliefs about it. For example, if I hear a sound in the kitchen and believe it is made by my

husband, I am not bothered at all. But if I believe I am alone in the house, the same sound can bother me a great deal. Here we see that feelings and behaviors (my actions about the sound) flow from the active process of thinking about or adding meaning to the actual event (the sound). The benefit of this truth is that we can change the way we think to feel/act better even if the situation does not change.

My role in therapy is to listen, encourage and teach you. Your role is to express concerns, learn and implement that learning. Counseling sessions are very much like a "coaching" session. The real hard work is often done in between the sessions. The goal is that eventually you will learn to apply the techniques yourself and become your own coach.

By the end of our first or second session, I will tell you how I see your case at this point and how I think we should proceed. I view therapy as a partnership between us. You define the problem areas to be worked on; I use some special knowledge to help you make the changes you want to make. Psychotherapy is not like visiting a medical doctor. It requires your best efforts to change thoughts, feelings, and behaviors. For example, I want you to tell me about important experiences, what they mean to you, and what strong feelings are involved. This is one of the ways you are an active partner in therapy.

I expect us to plan our work together. In our treatment plan we will list the areas to work on, our goals, the methods we will use, the time and money commitments we will make, and some other things. I expect us to agree on a plan that we will both work hard to follow. From time to time, we will look together at our progress and goals. If we think we need to, we can then change out treatment plan, its goals, and its methods.

An important part of your therapy will be practicing new skills that you will learn in our sessions. I will ask you to practice outside our meetings, and we will work together to set up homework assignments for you. I might ask you to do exercises, to keep records, and perhaps to do other tasks to deepen your learning. You will probably have to work on relationships in your life and make long-term efforts to get the best results. These are important parts of personal change. Change will sometimes be easy and quick, but more often it will be slow and frustrating, and you will need to keep trying. There are not instant, painless cures and no "magic wands." However, you can learn new ways of looking at your problems that will be very helpful for changing your feelings and reactions.

The frequency and duration of sessions varies for each client. Typically clients will start off seeing me once a week and then may decrease after a couple of months to every other week or even once a month depending on goals and progress. The number of sessions

varies greatly depending upon treatment goals and issues. Typically most clients will choose to agree to begin with 6 sessions, after which time we will re-evaluate progress and goals. The process of ending therapy, called "termination" can be a very valuable part of our work. Stopping therapy should not be done casually, although either of us may decide to end it if we believe it is in your best interest. If you wish to stop therapy at any time, I ask that you agree now to meet then for at least one session to review our work together. We will review our goals, the work we have done, any future work that needs to be done, and our choices.

CHILDREN & YOUTH THERAPY

I provide therapy for Children with behavioral and emotional problems, including ADD. For children with behavioral issues, we will gather thorough assessment information in order to accurately diagnose the issue. This will require feedback from parents as well as teachers and other caregivers. A collaborative effort with parents and teachers is the most effective approach for helping children with behavioral issues. Although individual therapy sessions to teach coping skills, anger management skills, and new ways of thinking will be a part of the therapeutic process, most of the work with kids takes place while they are living life. Therefore, much of the therapy work will be teaching the parents, teachers or other caregivers to be the "coach" in helping the child apply new ways of behaving to their current situation.

Therapy with children and youth who have emotional problems is generally a combination of individual, parent-child, and family counseling sessions depending on the presenting issue. Please refer to the "Agreement for Meetings with My Therapist" for more information regarding counseling and confidentiality with children and youth.

THE BENEFITS AND RISKS OF THERAPY

As with any powerful treatment, there are some risks as well as many benefits with therapy. You should think about both the benefits and risks when making any treatment decisions. For example, in therapy, there is a risk that clients will, for a time, have uncomfortable levels of sadness, guilt, anxiety, anger, frustrations, loneliness, helplessness, or other negative feelings. Also, clients in therapy may have problems with people important to them. Family secrets may be told. Therapy may disrupt a marital relationship. Sometimes, too, a client's problems may temporarily worsen after the beginning of treatment. Very often in therapy with children who are experiencing behavior problems, there is an exasperation of the problem behaviors before you see improvement. Most of these risks are to be expected when people are making important changes in their lives. Finally, even with our best efforts, there is a risk that therapy may not work out well for you.

While you consider these risks, you should know also that the benefits of therapy have been shown by scientists in hundreds of well-designed research studies. People who are depressed find their mood lifting. Others may no longer feel afraid, angry, or anxious. In therapy, people have a chance to talk things out fully until their feelings are relieved or the problems are solved. Clients' relationships and coping skills may improve greatly. They may get more satisfaction out of social and family relationships. Their personal goals and values may become clearer. They may grow in many directions- as persons, in their close relationships, in their work or schooling, and in the ability to enjoy their lives. I do not take on clients I do not think I can help. Therefore, I will enter our relationship with optimism about our progress.

CONFIDENTIALITY

I will treat with great care all the information you share with me. It is your legal right that our sessions and my records about you be kept private. That is why I ask you to sign a "release of records" form before I can talk about you or send my records about you to anyone else. In general, I will tell no one what you tell me. I will not even reveal that you are receiving treatment from me.

In all but a few rare situations, your confidentiality (that is your privacy) is protected by state law and the rules of my profession. Here are the most common cases in which confidentiality is not protected:

1. If you were sent to me by a court for evaluation or treatment, the court expects a report from me. If this is your situation, we will discuss this further.
2. If you are suing someone or being sued, being charged with a crime or involved in any other court matter, and you tell the court that you (or your child) are seeing me, I may be ordered to show the court my records. Please consult your lawyer regarding this.
3. If you make a serious threat to harm yourself or another person, the law requires me to try to protect your or that other person. This usually means telling others about the threat. I cannot promise never to tell others about threats you make.
4. If I Believe a child has been or will be abused or neglected, I am legally required to report this to the authorities.
5. There are additional confidentiality considerations for therapy with minors. Please refer to the "Agreement for Meetings with My Therapist" form for more information.

MY BACKGROUND

I am a Licensed Independent Social Worker with a Clinical Practice Specialty. (LISW-CP) I completed my M.S.S.W (Master of Science in Social Work) in 1995 and became licensed for independent practice in 1998. I have over 10 years of clinical experience in the delivery of therapy, assessment and consultation to children, adults and families. Prior to independent practice, I worked in both mental health clinic and school settings during which time I coordinated and provided therapy to children, adults and families with a wide range of issues. In addition to traditional individual and family therapy, I offer school consultations and home therapy visits as well as parent training.

As a professional, I will use my best knowledge and skills to help you. This includes adhering to the NASW (National Association of Social Workers) Code of Ethics as well as following all the laws governing Social Work practitioners in Independent Practice. I chose Social Work over a variety of other "therapy" professions because I was attracted to the core beliefs of Social Work which fit well with my Christian beliefs. Social Workers traditionally hold to the belief that services should be provided to clients

whenever possible regardless of ability to pay. Now, in the real world, I have to eat...but you will find in general that Social Workers charge less for their services than other counseling professions due to this core belief found in our code of ethics.

Social workers also look for the strengths of individuals and seek to build on the strengths as part of treatment. Rather than a medical "pathological" viewpoint (finding what's defective in you), I am trained to examine all the factors that both contribute to problems and can be resources in overcoming problems. This includes not only assessing the individual physical, emotional, spiritual & behavioral aspects, but also the family, social, cultural, economic, and religious factors which can be both obstacles and resources in meeting your therapy goals.

I am licensed and trained to practice Clinical Therapy- not law, medicine or any other profession. I am not able to give you good advice from these other professional viewpoints. I am not a medical doctor and cannot prescribe medications. If I believe that you may benefit from the use of medications in addition to therapy, I will refer you to a medical doctor or psychiatrist who will work with us in your therapy.

ABOUT OUR APPOINTMENTS

The very first time I meet with you we will need to give each other much basic information. I will need to gather extensive information about your history as well as your current problems so that we can best plan for your therapy. For this reason, I usually schedule 1 ½ hours for this first meeting. Following this, individual sessions will usually be 50 minutes. Couples sessions, family therapy sessions, or sessions with a parent and child may continue to be 90 minutes. I offer a reduced rate for sessions scheduled between 9am and 2pm on weekdays.

An appointment is a commitment to our work. We agree to meet here and to be on time. If I am ever unable to start on time, I ask your understanding. I also assure you that you will receive the full time agreed to. If you are late, we will probably be unable to meet for the full time, because it is likely that I will have another appointment after yours.

If you must cancel a session, please inform me as soon as possible, as it is difficult for me to fill a cancelled slot. Due to this reason, except for extreme emergencies, sessions not cancelled 48 hours in advance will be charged \$30.

FEES AND PAYMENTS

Payment for services is important in any professional relationship. This is even more true in therapy; one treatment goal is to make relationships and the duties they involve clear. You are responsible for seeing that my services are paid for. Meeting this responsibility shows your commitment and maturity.

Because Three Strands Counseling Services is an outreach of Three Strands Christian Church, we are able to offer therapy at a lower rate than most private practices as well as offer a few limited reduced fee scholarships for those with financial hardships.

The current regular fees are as follows. You will be given advance notice if the fees should change.

Regular Therapy service: For a session of 50 minutes, the fee is \$60*.

For a session of 90 minutes, the fee is \$80*.

*For Regular Therapy Service, we offer a discount of \$25 per session for appointments scheduled during the weekday hours of 9am-2pm.

Please pay for each session at its end. I have found that this arrangement helps us stay focused on your goals, and so it works best. It also allows me to keep my fees as low as possible, because it cuts down on bookkeeping costs. I suggest you make your check out before each session begins, so that our time will be used best. Other payment or fee arrangements must be worked out before the end of our first meeting.

Telephone Consultations: At times it may be necessary to have a telephone consultation as you are working on your therapy goals. There is no charge for brief phone calls (appointment change, quick questions), however, if more than a 10 minute call is necessary, you will be charged for this at the rate of \$30 per hour, prorated for the time needed.

Extended Sessions: Sometimes it may be better to go on with a session, rather than stop or postpone work on a particular issue. When this extension is more than 10 minutes, I will tell you, because sessions that are extended beyond 10 minutes will be charged on a prorated basis.

Other Services: Charges for other services, such as consultations with other therapists, home visits, school consultations or visits, or any court related services will be based on the time involved in providing the service at the regular fee schedule. Some services may require payment in advance.

Checks for counseling services should be made out to "Three Strands Christian Church." You may also pay cash if preferred. A receipt will be provided to you for your records. In an effort to keep all of our services affordable, we do not accept insurance payments as this leads to an increase in the amount of paperwork and time for our office.

If You Need to Contact Me

The best way to contact me in between scheduled appointments is to either call the office at 864-299-0990 or to e-mail me at 3strandskat@bellsouth.net. Since I will often be with a client during office hours, it is best to leave a message and I will return your call when possible. I make every effort to return calls and e-mails within 24 hours. If you have a crisis and cannot reach me, you or your family members should call your MD, contact the local mental health center, or go to the emergency room.

Family Court Issues

If you ever become involved in a divorce or custody dispute, I want you to understand and agree that I will not provide evaluations or expert testimony in court. You should hire a different mental health professional for any evaluations or testimony you require. This position is based on two reasons: (1) my statements will be seen as biased in your favor because we have a therapy relationship; and (2) the testimony might affect our therapy relationship (or the therapy relationship with your child in the case of therapy with minors), and I must put this relationship first.

OUR AGREEMENT

I, the client (or his or her parent or guardian), understand I have the right not to sign this form. I understand I can choose to discuss my concerns with you, the therapist, before I start (or the client starts) formal therapy. I also understand that any of the points mentioned above can be discussed and may be open to change. If at any time during the treatment I have questions about any of the subjects discussed in this brochure, I can talk with you about them, and you will do your best to answer them.

I understand that after therapy begins, I have the right to withdraw my consent to therapy at any time, for any reason. However, I will make every effort to discuss my concerns about my progress with you before ending therapy with you.

Client Signature _____

Printed Name _____

Relationship to client (if not self) _____

I, the therapist, have met with this client and have informed him or her of the issues and points raised in this brochure. I have responded to all of his or her questions. I agree to enter into therapy with the client, as shown by my signature here.

_____ Date _____

**AGREEMENT FOR MEETINGS WITH MY THERAPIST
CHILDREN & ADOLESCENTS**

I, _____ agree to meet with the therapist named below, once every _____, starting on _____. Our meetings will last about _____ minutes. When we meet, we may talk, draw pictures, play games, or do other things to help this therapist get to know me better and understand my problems.

I understand that my parent(s) or my guardian has a right to know about how I am doing in therapy. I agree that this therapist may talk with my parent/guardian to discuss how I am doing. They may also talk about concerns and worries they may have about me. Or they may talk about things the therapist and I decide my parent/guardian needs to know about. Sometimes this therapist may meet with my parent/guardian without me. At other times we may all meet together.

The things I talk about in my meetings with the therapist are private. I understand this therapist will not tell others about the specific thing I tell him or her. He or she will not repeat these things to my parent/guardian, my teachers, the police, probation officers, or any other people. But, there are two exceptions. First, because of the law, there therapist will tell others what I have said if I talk about seriously hurting myself or someone else. The therapist will have to tell someone who can help protect me or the person I have talked about hurting. Second, if I am being seriously hurt by anyone, this therapist has to tell someone for my protection.

I understand that sometimes I may not feel good about some things we may talk about in our meetings. I may feel uncomfortable talking to this therapist because I don't yet know her very well. I may feel embarrassed talking about myself. Some of the things we talk about may make me feel angry or sad. Sometimes coming to meetings may interfere with doing other things I enjoy more. But I also understand that coming to therapy should help me feel better in the long run. I may find that I will trust this therapist and can talk about things that I can't talk to anyone else about. I may learn some new, important and helpful things about myself and others. I may learn some new and better ways of handling my feelings or problems. I may feel less worried or afraid and come to feel better about myself.

Any time I have questions or am worried about the things that are happening in therapy, I know I can ask this therapist. HE or she will try to explain things to me in ways that I can understand I also know that if my parent/guardian has any questions, the therapist will try to answer them.

I understand that my parent can stop my coming to therapy any time he or she wishes. If I decide therapy is not helping me and I want to stop, The therapist will discuss my feelings with me and with my parent/guardian. But, I understand that the final decision about stopping is up to my parent/guardian.

Our signatures below mean that we have read this agreement, or have had it read to us, and agree to act according to it.

Child Signature: _____ date _____

Parent/Guardian Signature: _____ date _____

I, the therapist have discussed the issues above with the minor client and his or her parent/guardian. My observations of their behavior and responses give me no reason, in my professional judgment, to believe that these persons are not fully competent to give informed and willing consent.

Therapist signature _____ Date _____