**Informed Consent to Treatment**

**Risks of Counseling**

Counseling can be a difficult and painful process at times because it causes us to explore, examine, and feel parts of ourselves that have been hidden from our awareness. A helpful guideline to use is that counseling might sometimes be uncomfortable but should always feel safe. Sometimes counseling can cause you to feel worse before you feel better. This is usually because your awareness is growing, which is instrumental for therapy to deepen and for change to occur. Given that counseling can be a challenging process, expect that at times you might find that it is difficult to come to your session. This is called resistance and it is normal and an important part of the process. If you are noticing this, feel free to bring it up in your sessions so that we can discuss it.

At the start of the therapeutic process, I will typically spend a couple of sessions reviewing your history and evaluating your needs. I will also spend time discussing my approach to therapy and answering any questions you may have. You should evaluate this information, along with your opinion of whether you feel comfortable working with me. Therapy involves a commitment of time, money, and energy, so you should be careful about the therapist you select. If you have any questions about my procedures, you should discuss them with me whenever they arise. If your doubts persist, I will be happy to offer you other referrals.

**Length Between Sessions**

The ideal length between sessions is one week. This is especially true in the beginning as you and I build momentum and trust through the therapeutic relationship. Every week is also helpful in integrating the change that occurs in the counseling room into the rest of your life. Twice per week can be helpful for intensive therapeutic work and accelerated change. Twice per week may also be indicative that you are in crisis and need extra support. Bi-weekly is sometimes necessary due to financial and/or scheduling constraints.

**Extra Fees**

We ask to have your credit card information on file while you are seeking services at Full Circle Connection. Your security is very important to me and I will make every effort to keep your information secure. With your permission, I will charge your card for any services and/or fees.

**$90 Hourly Rate for Care Coordination and other Professional Services**

I understand that Full Circle Connection charges $90 for other professional services you may need, beyond hourly sessions. I will prorate the hourly cost of $90 if I work for periods of less than or more than one hour. Other services include report writing, telephone conversations lasting longer that ten minutes, consulting with other professionals with your permission (psychiatrists, physicians, teachers, guidance counselors, attorneys, etc.), preparation of records or treatment summaries, and the time spent performing any other service you may request of me. Meetings attended on your behalf are also billed at $90 per hour, including travel time.

**$30 Fee for Bounced Checks or Insufficient Funds**

If a check has insufficient funds to cover the amount, the three things will happen: you will incur a $30 fee from Full Circle Connection. Then, your credit care on file will immediately be charged for the amount of the check plus the $30 fee. Finally, we will also be unable to accept checks from you in the future (you may pay with credit card or cash).

**$15 Fee if Payment is Not Collected at Time of Service**

It is expected that you pay at the time of service. A $15 fee will be incurred if you do not pay at that time. The only exception is if your credit card on file does not work because it needs to be updated. **If you neglect to pay for two sessions, then you will need to settle your account before scheduling any further sessions at Full Circle Connection.**

**Out-of-Network Insurance**

If you are choosing to use your out-of-network benefits, this means you will pay out of pocket at the time of service. I will then provide you with a Super Bill in order to file the claim with your insurance company. Either you will receive a check for the reimbursement amount, of the amount paid out of pocket will go towards your deductible. It is your responsibility to submit the claims.

**Referrals**

I welcome referrals, which signify your satisfaction and trust in my services.

**Emergencies**

In the event of an emergency, please call me and leave a message if need be. In the message, alert me to the emergency and let me know how I can contact you. I will return your call within 24 hours. If you are unable to reach me and are in danger of harming yourself or others, please go to your nearest hospital emergency room or contact the crisis line at ()

**Telephone and Email Communication**

My telephone number is connected to a 24-hour voicemail. I check messages several times a day during working hours, and I will return your call within 24 hours Monday through Friday. If your call is urgent, let me know when you leave a message and I will do my best to call you back as soon as possible. In an extreme emergency, call the Travis county help hotline, 24 hours a day, 7 days a week at (512) 472-4357, call 911, or go to the nearest hospital emergency room.

I may choose to use email for scheduling or other logistical issues. Please do not include any personal information in an email, as I cannot guarantee its confidentiality. I cannot respond to urgent issues via email. Also, please note that I do not receive texts.

**Cancelling or Rescheduling**

My scheduling software sends reminder emails before your scheduled appointment. To cancel a session, you are welcome to reply to this reminder email, leave me a voicemail, or email me directly.

**Substance Use**

As therapy requires increased awareness of thoughts, beliefs, internal and external experiences, I ask that you do not attend sessions while under the influence of drugs, alcohol, or any other substances.

**Termination of Counseling**

If you feel that you are approaching readiness to leave counseling, please speak with me regarding this. Likewise, if I feel that you are approaching readiness to leave counseling, I will certainly discuss this with you as well. Additionally, we will review your progress and status on and on-going basis. You may seek a second opinion from another therapist or may terminate counseling at any time. If you do decide to terminate counseling, please inform me as far in advance as possible. If this is not possible, please do so at the beginning of the last session. In a therapeutic relationship of any length, termination and closure are very important processes and most people find their experience to be incomplete if there has not been an adequate opportunity to discuss the reasons for ending.

**Cancellation Policy**

Please give more than 24 hours notice to cancel. This provides me with time to fill the space. **If you cancel an appointment with less than 24 hours (excluding Sundays) or do not show up to your appointment, you will be charged for the full fee of the session.** The only exception to our cancellation policy is if you are sick or have an emergency. If you are doing couples counseling and only one of you is unable to come, the other is still expected to attend.

**Legal Proceedings and Court Involvement**

If you anticipate divorce, child custody disputes, or any other court proceedings during your work with me, please discuss this with me. I cannot offer evaluations to be used in legal proceedings. If this is what you are wanting, I am happy to refer you to someone who can.

**Confidentiality**

Your confidentiality is very important. Confidentiality is defined as keeping the information shared between client and therapist private. Under Texas law, I will not share anything about your counseling unless you give written permission or unless the following **exceptions** to confidentiality occurs:

* Suspected abuse (including witnessing domestic violence) of a child, elder, or a developmentally disabled or mentally ill person;
* Threats of danger to self or others;
* Infection of a potentially life threatening illness that could be transmitted to an uninformed person;
* Information required in court proceedings or by other relevant agencies;
* Providing information concerning case consultation or supervision, and;
* Defending claims brought by client against licensee.

I also often consult with other therapists in order to offer the best help to you and the challenges you are facing. I do not use names when consulting. Please let me know if you have any questions about your confidentiality at Full Circle Connection.

*Counseling Children/ Minors*

I generally use a family therapy approach when assisting children/minors. Rather than solely working with the child/minor individually, I attempt to actively involve parents/guardians and may even involve other influential family members in addressing the problems. I view parents and the family as the most powerful factor in a child’s life. This is necessary for healing and problem-solving. I believe that children/minors benefit most if their therapist is allied with their parents/guardians in address the system the child is naturally a part of. I recognize that in some cases, individual therapy with a child/minor may be beneficial and I will examine this option with a parent/guardian as needed. Teens, however are different because of their development needs for differentiation. Please feel free to ask any questions regarding my approach.

**Therapy Agreement**

By signing below, I agree that:

- I have read, understand, and agree to the Informed Consent document; and

- I had the opportunity to have my questions answered.

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Client Signature(s)

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Parent/Guardian Signature (if necessary)

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Lubna Ali, LMFT