

Informed Consent on Treatment and Policies

This informed consent is designed to give you information about my practice and our professional relationship. My purpose is to give you relevant and essential information about me and my services, to help you make informed decisions and give consent for treatment.

CONFIDENTIALITY

I regard the information you share with me with the greatest respect. I will maintain confidentiality and privacy of your therapy and my records, as it is a privilege of yours and is protected by state law and professional ethics in all but a few situations. These situations include:

(1) If I suspect you intend to harm yourself, another person or property. Whenever possible, I will discuss my concerns with you before involving anyone else, to see if we can establish a safety plan.

(2) When I suspect a child, elder or dependent adult has been or will be abused or neglected. In most cases, I will discuss my concerns with you, to let you know if and when I may need to make a report, since I am a mandatory reporter.

(3) I consult with a Marriage & Family Therapy (MFT) supervisor, Erin Jacobs, about certain cases that include psychotherapy (emotional or relational issues). In general, she will not be viewing the details of my charts, and I use first names of clients only. This is a HIPPA-protected relationship, meaning she will not share this information with anyone else.

(4) I consult regularly with other professionals, such as craniosacral therapists or Somatic Experiencing practitioners, regarding clients I work with. However, a client's identity remains completely anonymous (first names or pseudonyms), and these consultations are confidential, meaning these practitioners will not discuss them outside consult setting.

In all other circumstances, I will maintain confidentiality unless you give me expressed written authorization to do otherwise, or sign a **release of information** (ROI) with another office or practitioner (medical, legal or insurance). For example, if you submit your bills for reimbursement by insurance, I will be expected to send copies of my notes and bills to the insurance or attorneys, once you sign a release of information.

If you wish for me to communicate with another practitioner, such as your doctor, I will share only pertinent information that would be helpful for that practitioner to know.

TRAINING/CREDENTIALS, SCOPE OF PRACTICE

I am licensed to practice both **physical therapy** and **psychotherapy** in Colorado. I graduated from Louisiana State University Medical Center with a Bachelors' of Science as a physical therapist, and I earned my Masters' in Marriage & Family Therapy from Regis University.

I have specialized training and completed certifications in the following treatment methods:

- 1. Biodynamic craniosacral therapy
- 2. Prenatal/Perinatal/Birth/Attachment therapy
- 3. Somatic Experiencing ®
- 4. Brain-spotting



I am currently working towards certification in the following methods: **D.A.R.e. (Dynamic Attachment Re-patterning experience**).

PROCESS OF THERAPY:

My work is integrative and is founded on the belief that our minds, bodies, emotions and relationships are all inter-connected, and intertwined, and the nervous system is key. One of my aims is to help my clients to better understand and listen to their bodies, emotions, thoughts/beliefs and relationships, as part of their healing process. My focus is on holistic (mindbody) wellness, and my areas of clinical expertise include chronic and acute pain, headaches/migraines, concussions (mild traumatic brain injuries), musculoskeletal problems (including imbalances in posture and muscle tension), trauma/PTSD, anxiety/depression, stress-related somatic disorders, early/birth trauma and attachment issues.

Treatment interventions can include craniosacral therapy, other manual therapy (muscle energy, joint mobilization, manual traction, soft tissue mobilization), exercises to release tension (including positional exercises called Strain-Counterstrain). In addition, I will often incorporate Somatic Experiencing® (SE) to help you to track sensations, thoughts, images, emotions, and beliefs that may come up, in the course of treatment. (see more information on SE below).

All therapeutic work, including SE, CST, movement education, body awareness, verbal and/or hands-on therapy, is professional and respects your personal boundaries. This means, in part, that any sexual relationships with a practitioner are strictly prohibited. You of course have the right to refuse any treatment or to withdraw from therapy, or take a break at any time.

After our initial session, I will inform you of my assessment of what I think I can be helpful with and what I may not be able to help with. If I feel I cannot help you, I will tell you that, and provide referrals for you when possible. Sometimes I may suggest other therapies as an adjunct to my work. While it is impossible to predict the exact outcomes of therapy, we will work together collaboratively toward the goals that we establish. In addition to the work we do together in my office, I may suggest things for you to do between treatment sessions.

What to expect:

Your symptoms may be stirred up slightly, or you may even feel new sensations or emotions during or after your treatment sessions. This is normal, as your body and nervous system will be adjusting to the changes. I strive to abide by the creed, "Less is more, slow is fast," as proper pacing and titration will help your system to more easily integrate changes. If you have a strong or uncomfortable reaction at any time, please let me know. Your feedback is very important to me, during, after and between sessions, and this will help guide my treatment.



Any uncomfortable sensations or emotions generally are temporary and will settle within 24-72 hours. However, beneficial changes tend to be more long-lasting, as your system is able to release old patterns of tension. To give you an idea of what you may feel during or following a session, here is a non-exhaustive list of potential sensations or emotions you may notice:

- 1. deep relaxation
- 2. warmth or heat
- 3. twitching or shaking
- 4. muscle tension, or an impulse to move or stretch in a certain direction
- 5. compression or tightness
- 6. expansion or lengthening, stretching from the inside-out, (e.g. head or neck)
- 7. change in breathing
- 8. abdominal noises (gurgling), digestive movements
- 9. emotions arising (e.g., irritability, anxiety, sadness, joy or peacefulness)
- 10. seeing images or colors
- 11. vision changes (usually more clarity)
- 12. dizziness or light-headedness
- 13. being in an altered state, feeling "floaty" or "spacey"
- 14. tingling in arms, legs or face

Somatic Experiencing[®]

When appropriate, and according to my clinical judgment, I will use Somatic Experiencing (SE) in our work together. SE is a holistic (incorporating physical, emotional and cognitive) approach to the resolution and healing of trauma, developed by Dr. Peter Levine and is supported by evidence-based research. It is based upon the observation that wild prey animals, though threatened routinely, are rarely traumatized. Animals in the wild utilize innate mechanisms to regulate and discharge the high levels of energy arousal associated with defensive survival behaviors. These mechanisms provide animals with a built-in "immunity" to trauma that enables them to return to normal in the aftermath of highly "charged" life-threatening experiences. Humans can come away from overwhelming events feeling traumatized because our rational brains over-ride our more instinctual ways of recovering (such as thinking we need to "control" our emotions or get on with our day after a car accident, for instance.)

- SE employs awareness of body sensation to help people "renegotiate" and heal rather than re-live or re-enact trauma.
- SE's guidance of the bodily "felt sense," allows the highly-aroused survival energies to be safely experienced and gradually discharged.
- SE may employ touch such as craniosacral therapy in support of the renegotiation process.
- SE "titrates" experience (breaks down into small, incremental steps), rather than evoking catharsis which can overwhelm the regulatory mechanisms of the organism.

SE can result in several benefits to you, such as relief of traumatic stress symptoms, increased resiliency, improved relationships, creativity and resourcefulness. Like any other treatment, it may temporarily stir up symptoms, or you may even feel new sensations, pains or emotions after a session. These symptoms usually settle down within 24-72 hours, as your nervous system



integrates the changes. I am always interested in hearing your feedback about how you feel during, as well as after and between sessions. So please feel free to reach out to me if you have any questions, comments or concerns.

For more information about SE please note the following references:

- Levine, P. and Frederick, A. (1997). *Waking the Tiger: Healing Trauma: The Innate Capacity to Transform Overwhelming Experiences.* Berkeley, CA: N. Atlantic Books.
- Kline, M. and Levine, P. (2007). *Trauma Through A Child's Eyes: Awakening the Ordinary Miracle of Healing.* Berkeley, CA: North Atlantic Books.
- Levine, P., In An Unspoken Voice: How the Body Releases Trauma and Restores Goodness. North Atlantic Press. 2010

Somatic Experiencing Trauma Institute website: <u>http://www.traumahealing.com.</u>

LICENSURE REGULATION

The practice of licensed or registered persons in the field of psychotherapy is regulated by the Mental Health Licensing Section of the Division of Professions and Occupations. The Board of Marriage & Family Therapists can be reached at 1560 Broadway, Suite 1350, Denver, Colorado 80202, (303) 894-7800, if you have any questions or complaints about any licensed practitioner.

The following is a list of different mental health licenses in Colorado, regulated by DORA, with a brief explanation of the education and training required for each license. The ones that apply to me are Registered Psychotherapist (now called "unlicensed psychotherapist"), license #NLC0110516, and Marriage & Family Therapy candidate (license # 0014035). I am currently working toward licensure as an MFT. My PT license number is 0008536.

A Psychologist Candidate, a **Marriage and Family Therapist Candidate**, and a licensed Professional Counselor Candidate must hold the necessary licensing degree, and be in the process of completing the required supervision for licensure.

A **Registered (Unlicensed) Psychotherapist** is a psychotherapist listed in the State's database and is authorized by law to practice psychotherapy in Colorado, but is not licensed by the state and is not required to satisfy any standardized educational or testing requirements to obtain a registration from the state.

The following do not apply to me, but I am required to provide you with this information by DORA:

A Licensed Professional Counselor must hold a master's or doctoral degree in professional counseling, have at least two years' post-master's or one year postdoctoral practice, and pass an exam in in professional counseling.

A Certified Addiction Counselor I (CAC I) must be a high school graduate or equivalent, complete required training hours and 1,000 hours of supervised experience.

A **Certified Addiction Counselor II** (CAC II) must be a high school graduate or equivalent, complete the CAC I requirements, and obtain additional required training hours, 2,000 additional hours of supervised experience, and pass a national exam.



A **Certified Addiction Counselor III** (CAC III) must have a bachelor's degree in behavioral health, complete CAC II requirements, and complete additional required training hours, 2,000 additional hours of supervised experience, and pass a national exam.

A Licensed Addiction Counselor must have a clinical master's degree, meet the CAC III requirements, and pass a national exam.

A Licensed Social Worker must hold a master's degree from a graduate school of social work and pass an examination in social work. A Licensed Clinical Social Worker must hold a master's or doctorate degree from a graduate school of social work, practiced as a social worker for at least two years, and pass an examination in social work.

A Licensed Psychologist must hold a doctorate degree in psychology, have one year of post-doctoral supervision, and pass an examination in psychology.

A Licensed Marriage and Family Therapist must hold a master's or doctoral degree in marriage and family counseling, have at least two years' post-master's or one year post-doctoral practice, and pass an exam in marriage and family therapy.

FEES

The fee for a one-hour appointment is \$120. Longer appointments will be prorated. Packages are available at a discounted hourly rate. The frequency of treatment will depend upon your needs, scheduling and the severity/chronicity of your troubles. In general, I recommend once a week treatments initially, especially for more acute or complicated conditions.

INSURANCE

I do not participate with insurance companies, except to provide copies of notes and bills as needed (primarily for auto accidents). In most cases, you should get reimbursed for my treatments in the case of auto accidents, though the timing and extent of coverage may depend on whether you have Med pay with your auto insurance, or whether you need to wait for a settlement to be reimbursed. Some of my clients have been reimbursed up to 50-70% through out-of-network insurance benefits. I encourage you to check with your insurance company for their policies on out-of-network. I can provide you with an invoice to send to your insurance company or to submit to HSA or Flex spending accounts. I do accept HSA cards.

PAYMENT

Payment is due at each session by cash, check or credit card (including flexible spending or HSA cards). There is a \$25 charge for returned checks.

MISSED APPOINTMENT/NO SHOW/LATE CANCELLATION

I charge the full fee for missed appointments and appointments not cancelled within 48 hours of scheduled time, since it may affect my ability to fit in another client at late notice. However, I will waive the fee in case of emergencies, illness or hazardous roads. If you think you may have symptoms or have been exposed to Covid-19, please let me know, and I will not charge for late cancellations in this case.

EMAIL/TEXTING



Electronic media (text and email) may not safeguard confidentiality sufficiently, so please be aware of what you share over email or text. It may take me up to two to three days to return an email. You can text me for scheduling, to give me feedback or to ask brief questions, as long as you realize the limits of confidentiality. I can set up brief (10-minute) phone calls, if you need to discuss an issue which you are not comfortable discussing in text or email.

EMERGENCIES and VACATION

In case of an emergency, you should go to the nearest emergency room or call 911. If there is a health issue with which you need my assistance before our next session, please leave me a message. I will call you back as soon as I can.

When I am on vacation, and away from cell phone or email service, my voice mail will indicate this.

ETHICS:

I abide by the Codes of Ethics of American Association for Marriage & Family Therapy and the American Physical Therapy Association. You can find the specifics of each code of ethics at <u>www.aamft.org</u> and <u>www.apta.org</u>, respectfully. My intent is always to be respectful, collaborative, to listen to your concerns, and to be of service to you. Please ask me any questions or express concerns you may have as you move through your healing journey.

I have read the informed consent and have been given an opportunity to have my questions answered.

Client Name (print)	Date	Signature
Parent or Guardian (if client 16 y	years old) (Print) Date	Signature
Parent or Guardian (if client 16	years old) (Print) Date	Signature