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Licensed Marriage and Family Therapist

Personal Disclosure Statement and Notice of Privacy Practices

Welcome to my practice. I appreciate you giving me the opportunity to help you.

This brochure answers some common questions clients ask about therapy. I believe our work together will be more helpful to you when you have an idea what we are trying to accomplish.

Please print out this brochure, read it and write down any questions you think of and bring it to your first appointment. We can discuss how any issues apply to your own situation. When you have read and fully understood this brochure, I will ask you to sign it at the end of the session. I will also sign it and make a copy for each of us.

Treatment Philosophy

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 therapy. When you feel this way, therapy is more likely to be helpful to you.

Let me describe how I see therapy. My theoretical training has mainly been based on a traditional psycho dynamic model which utilizes insight as a means for change and views present relationships as being influenced by earlier childhood history. This approach emphasizes creating a safe environment to be able to tell your story and work through feelings. While the primary therapeutic technique is talking, sometimes I offer other modes of expression like drawing or writing. Cognitive/behavioral therapy can be used to undo unhealthy thought patterns and to help restore positive self esteem and self worth.

I usually take notes during our meetings. You may find it helpful to bring a notebook to write down any important thoughts that may come to you during the session. I view the therapy relationship as a way to heal past dysfunctional relationships. It is helpful to record any reactions or feelings from the session and talk about them in the following session. Psychotherapy requires your active involvement. The session is a place for you to tell me about your important experiences, what they mean to you, and what strong feelings are connected to them.

In your treatment plan we can list the areas you want to work on, the goals, the time and other components. From time to time, we will look at your goals and progress. If we think there is a need, we can change your treatment plan, and/or its methods. A part of therapy will be practicing new skills that you will learn in our sessions. Change will sometimes be easy and quick, but sometimes it can be slow and frustrating, and you will need to keep trying. There are no instant, painless cures. However, you can learn new ways of looking at your problems that can be helpful for changing your feelings and reactions.

Most of my clients see me once a week. The length of treatment depends on the specific issues and symptoms or the severity and length of the trauma. While some need a

more long term treatment, other clients only need to come for three or four months. After that, we meet less often for a few months. Therapy then comes to an end. The process of ending therapy, called "termination" is a valuable part of the work. Stopping therapy should not be done casually. 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 to meet 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 the choices. If you would like to take a "time out" from therapy to try it on your own, we can discuss the most productive way to handle this.

The Benefits and Risks of Therapy

As with any 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 may, for a time, have some uncomfortable levels of negative feelings. Clients may recall unpleasant memories and may have problems with people important to them. Sometimes too, a client's problems may temporarily worsen after the beginning of treatment. Some of these risks are to be expected when people are making important changes in their lives. Finally, even with our best efforts, there is the risk that therapy may not work out well for you.

While you consider these risks, you should also know the benefits of therapy have been shown by scientists in hundreds of well designed research studies. After treatment many people who are depressed find their mood lifting. Others experience positive changes or 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 can improve greatly. They can get more satisfaction out of social and family relationships. Their personal goals and values can become clearer. They can grow in many directions--as persons, in their close relationships, in their work and schooling, and in their 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.

Consultations

If you could benefit from treatment I cannot provide, I will help you to get it. You have the right to ask me about such other treatments, their risks and benefits. Based on what you learn about your problems, I may recommend you see your medical doctor for a medical exam or for an evaluation for medication. If I do this, I will fully discuss my reasons with you so that you can decide what is best for you. If you are treated by another professional, I will coordinate my services with them and with your medical doctor.

If for some reason treatment is not going well, I might suggest another therapist or professional in addition to me. As a responsible person and ethical therapist, I cannot continue to treat you if my treatment is not working for you. If you wish another professional's opinion at any time, or wish to talk to another therapist, I will help you find a qualified person and provide him or her with the information needed.

What to Expect from Our Relationship

As a professional, I will use my best knowledge and skills to help you. This includes following the standards of the American Association of Marriage and Family Therapists, or AAMFT. In your best interests, the AAMFT put limits on the relationship between a therapist and a client and I will abide by these. Let me explain these limits so that you will not think they are personal responses to you.

First, I am licensed marriage and family therapist and trained to practice psychotherapy--not law, medicine, finance or any other profession. I am not able to give you good advice from these professional viewpoints.

Second, Washington State laws and the rules of the AAMFT require me to keep what you tell me confidential. You can trust me not to tell anyone else what you tell me, except in certain limited situations. You will find an explanation of what those exceptions are in the "About Confidentiality" section in this brochure. Here I want to explain that I try not to reveal who my clients are. This is my effort to maintain your privacy. If we meet on the street or socially, I may not say hello or talk to you very much. My behavior will not be a personal reaction to you, but a way to maintain the confidentiality of our relationship.

Third, in your best interest, and following the AAMFT standards, I can only be your therapist. I cannot have any other role in your life. I cannot, now or ever, be a close friend with any of my clients, I cannot be a therapist to someone who is already a friend.

I can never have a sexual or romantic relationship with any client during, or after, the course of therapy. I cannot have a business relationship with any of my clients, other than the therapy relationship.

About 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 unless I have your permission.

In all but a few rare situations, your confidentiality is protected by state law and by 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 or an employer for evaluation or treatment, the court or employer expects a report from me. If this is your situation, please let me know before you tell me anything you do not want the court or your employer to know. You have a right to disclose only what you are comfortable.
2. Are you suing someone or being sued? Are you being charged with a crime? If so, and you tell the court that you are seeing me, I may then be ordered to show the court my records. Please consult your lawyer about these issues.
3. If you make a serious threat to harm yourself or another person, the law requires me to try to protect you or that other person. This usually means telling others about the treatment. 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.

There are two situations in which I might talk about part of your case with another therapist. I ask now for your understanding and agreement to let me do so in these two situations. First, when I am away from the office for more than a few weeks, I may ask a trusted fellow therapist to cover for me. This therapist would be available to you in emergencies. Therefore, she needs to know about you. Of course, this therapist is bound by the same laws and rules that try to protect your confidentiality. Second, I sometimes consult other therapists or another professional about my clients. This helps me in giving high-quality treatment. These persons are also required to keep your information private. Your name will not be given to them, and they will be told only as much as they need to know to understand your situation.

Except for the situations I have described above, I will always maintain your privacy. I ask you not to disclose the name or identity of any other client being seen in this office.

If your records need to be seen by another professional, or anyone else, I will discuss it with you. If you agree to share these records, you will need to sign a release form. This form states exactly what information is to be shared, with whom, and why, and it also sets time limits. You may read this form at any time. If you have questions, please ask me.

It is my office policy to destroy clients' records five years after the end of our therapy. Until then, I will keep your case records in a safe, secure place.

If I must discontinue our relationship because of illness, disability, or other presently unforeseen circumstances, I ask you to agree to my transferring your records to another therapist who will assure their confidentiality, preservation and appropriate access.

If we do family or couple therapy and you want to have my records of this therapy sent to anyone, all of the adults present will have to sign a release.

An insurance company will sometimes ask for information on symptoms, diagnosis, and my treatment methods. It will become a part of your permanent record. Please understand that I have no control over how these records are handled at the insurance company. My policy is to provide only as much information as the insurance company will need to pay your benefits.

You can review your own records in my files at any time. You may add to them or correct them. I ask you to understand and agree that you may not examine records created by anyone else that has been sent to me. In some rare situations, I may temporarily remove parts of records before you see them. This would happen if I believe that the information would be harmful to you, but I will discuss this with you.

My Background

I am a marriage and family therapist with over 20 years of experience. I am trained and experienced in doing individual, couple and family therapy with adults, adolescents and children. Earlier in my career, I worked in clinics and similar settings. I hold these qualifications:

- I have a masters degree MS in clinical counseling with a marriage, family and child counseling emphasis from the California State University at Hayward whose program is approved by the AAMFT.
- I have a bachelors degree BA in psychology from the University of California at Berkeley.

- I completed internships in marriage, family and child counseling at New Directions Clinic, Cornerstone Counseling, New Light Counseling, all approved by the BBSE of California.
- I am a licensed marriage and family therapist in the states of Washington and California.
- I am a clinical member of the American Association of Marriage and Family Therapists (AAMFT), the Washington Association of Marriage and Family Therapists (WAMFT), American Association of Christian Counselors(AACC), Connections and New Life Ministries.

About Our Appointments

For the first few sessions we will be discussing a lot of basic information and doing some history gathering. We will usually meet for a 50 minute session once a week, then less often. We can schedule meetings for both your and my convenience according to space available. I will try to tell you at least a few weeks in advance of my vacations and other times we cannot meet. Please ask about my schedule in making your own plans.

An appointment is a commitment to our work. I will consider our meetings very important and ask you to do the same. Please try not to miss sessions if you can possibly help it. Your session time is reserved for you. If you must cancel, please give me at least 48 hours notice or you will be charged the full fee for the missed session for other than the most serious reasons. Your insurance will not cover this charge.

I request that you do not bring children with you if they are young and need baby-sitting or supervision, which I cannot provide. Although there are no toys in the waiting room, I can provide some reading material suitable for older children.

Fees, Payments, and Billing

Payment for services is an important part of any professional relationship. This is even more true in therapy. One treatment goal is to make clear the therapy relationship, duties and obligations. You are responsible for seeing that my services are paid for. Meeting this responsibility shows your commitment and maturity.

My current fees are as follows. Regular therapy services: For an individual session of 50 minutes, the fee is \$120. You will be given advance notice, if my fees should change. Please pay at the beginning of each session. I suggest you make out your check before each session begins, so that you can make the best use of our time. Other payment or fee arrangements must be worked out before the end of our first meeting.

Telephone consultations: I believe that telephone consultations may be suitable or even needed at times in our therapy which is why I do not charge for the first five minutes of telephone time, after that the charge will be \$2 per minute. If I need to have long telephone conferences with other professionals as part of your treatment, I will talk it over with you ahead of time and the charge will be the same as for regular therapy services. If you are concerned about this, please be sure to discuss it with me in advance so we can set a policy that is comfortable for both of us. Of course, there is no charge for calls about appointments or similar business.

Extended sessions: Occasionally 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.

Reports: I will not charge you for my time spent making routine reports to your insurance company. However, I will have to bill you for any extra long or complex reports the company might require. The company will not cover this fee.

Other services: Charges for other services, such as hospital and school visits, consultations with other therapists or professionals, home visits, or any court-related services (such as consultations with lawyers, depositions, or attendance at courtroom proceedings) will be based on the time involved in providing the service at my regular fee schedule. Some services may require payment in advance.

I realize that my fees involve a substantial amount of money, although they are well in line with similar professionals' charges. For you to get the best value for your money, we must work hard and well. You have a responsibility to pay for any services you receive before you end the relationship.

Because I expect all payment at the time of our meetings, I usually do not send bills. However, if we have agreed that I will bill you, I ask that the bill be paid within 5 days of when you get it.

Periodically, I will give you a statement. The statement can be used for health insurance claims, as describes in the next section. It will show all our meetings, the charges for each, how much has been paid, and how much (if any) is still owed.

If you think you may have trouble paying your bills on time, please discuss this with me. I will also raise the matter with you so we can arrive at a solution. If your unpaid balance reaches \$500, I will notify you by mail. If it remains unpaid, we will discuss alternate ways to receive treatment. In rare cases, I may have to stop therapy with you.

If there is any problem with my charges, my billing, your insurance, or any money-related point, please bring it to my attention. I will do the same with you. Such problems can interfere greatly with our work. It is important they be worked out openly and quickly.

If You Have Traditional Health Insurance Coverage

Because I am a master's level licensed marriage and family therapist, many health insurance plans will help you pay for therapy and other services I offer. These plans include Regence Blue Shield, Uniform, First Choice, APS and others. Because health insurance is written by many different companies, I cannot tell you what your plan covers. Please read your plan's booklet under coverage for "Out patient Psychotherapy" or under "Treatment of Mental and Nervous Conditions." Or call your employer benefits office to find out what you need to know. If your health insurance will pay part of my fee, I will help you with your insurance claim forms. However, please keep two things in mind:

1. I had no role in deciding what your insurance covers. Your employer decided which services, if any, will be covered, and how much you and I will be paid. It is in your best interest to check your insurance coverage, deductibles, payment rates, co-payments as soon as possible to know exactly what your policy provides.
2. You, not your insurance company or any other person or company, are responsible for paying the fees we agreed upon. If you ask me to bill an insurance company and I do not receive payment on time, I will then expect this payment from you. To seek

payment from your insurance company, you must first obtain a claim from your employer's benefits office or call your insurance company. Complete the claim form. Then attach my statement to the claim form and mail it to your insurance company. My statement already provides the information asked for on the claims form

If You Need to Contact Me

I cannot promise that I will be available at all times. I do not take calls when I am in session with a client. You can always leave a message on my answering machine, and I will return your call as soon as I am available. Generally, I will return messages daily except on Saturdays, Sundays and holidays.

If you have an emergency or crisis and you cannot reach me, you or your family members need to call 911 or one of the community emergency agencies: care crisis response 24 hour crisis line at 425-258-4357, or the crisis clinic at 206-461-3222, or the nearest hospital emergency room.

If I Need to Contact Someone About You

If there is an emergency during our work together, or I become concerned about your personal safety, I am required by Washington State law and by the rules of my profession to contact someone close to you--perhaps a relative, or the authorities, if I become concerned about you harming someone else.

Please write down the name and information of the chosen contact person in the blanks provided:

Name: _____

Address: _____

Phone: _____ Relationship to you: _____

Other Points

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.
2. The testimony might affect our therapy relationship, and I must put this relationship first.

Statement of Principles and Complaint Procedures

It is my intention to fully abide by all the rules of the American Association of Marriage and Family Therapists (AAMFT) and by those of my state license.

Problems can arise in our relationship, just as in any other relationship. If you are not satisfied with any area of our work, please raise your concerns with me at once. Our work together will be slower and harder if your concerns with me are not worked out. I will make every effort to hear any complaints you have and to seek solutions to them. If you feel that I, or any other therapist, has treated you unfairly or has even broken a professional rule, please tell me. You can also contact the state or local psychological association and speak to the chairperson of the ethics committee who can help clarify concerns or tell you how to file a complaint. You may also contact the Department of Health in Olympia, Washington, the organization that licenses those of us in the independent practice of marriage and family therapists, social workers and mental health counselors.

In my practice as a therapist, I do not discriminate against clients because of any of these factors: age, sex, marital/family status, race, color, religious beliefs, ethnic origin, place of residence, veteran status, physical disability, health status, sexual orientations, or criminal record unrelated to present dangerousness. This is a personal commitment, as well as being required by federal, state, and local laws and regulations.

I will take steps to advance and support the values of equal opportunity, human dignity, and racial/ethnic/cultural diversity. If you believe you have been discriminated against, please bring this matter to my attention immediately.

Our Agreement

I, the client, or his/ her parent or guardian understand I have the right not to sign this form. My signature below indicates that I have read and discussed this agreement; it does not indicate that I am waiving any of my rights. I understand I can choose to discuss my concerns with you, the therapist, before I start 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. I understand that no specific promises have been made to me by this therapist about the results of treatment, the effectiveness of the procedures used by the therapist, or the number of sessions necessary for therapy to be effective. I have read, or have had read to me, the issues and points of this brochure. I have discussed those points I did not understand, and have had my questions, if any, fully answered. I agree to act according to the points covered in this brochure. I hereby agree to enter into therapy with this therapist, (or to have the client enter therapy), and to cooperate fully and to the best of my ability, as shown by my signature here.

Signature of client

Signature of client

Date

Printed name

Printed name

I, the therapist, have met with this client (and/or parent or guardian) for a suitable period of time, and have informed him or her of the issues and points raised in this brochure. I have responded to all of his/her questions. I believe this person fully understands the issues, and I find no reason to believe this person is not fully competent to give to me informed consent to treatment. I agree to enter into therapy with this client, as shown by my signature here.

Signature of therapist