

SAMARITAN COUNSELING CENTERS, INC. INFORMED CONSENT

The following information provides details about Samaritan policies and procedures. Please read this document and sign it showing you agree with the information that you have read and understand it. Please ask the clinician to discuss this document with you if you have any questions. When you sign this document, it is legally binding agreement between you and Samaritan Counseling Centers, Inc.

SERVICE

Samaritan Counseling Centers, Inc. is a multidisciplinary facility, which offers services provided by Licensed Clinical Social Workers, Licensed Clinical Mental Health Counselors, and Licensed Clinical Psychologists. We also offer opportunities to student clinicians and pre-licensed clinicians under the direct supervision of licensed staff. We provide outpatient psychological assessment and psychotherapy to adults and adolescents. Samaritan is firmly committed to non-discrimination and provides services to individuals regardless of gender, religion, disability, sexual orientation, race, ethnic group and socioeconomic status. Samaritan is open Monday through Friday by appointment only. Office staff is generally available from 9:00 a.m.- 4:30 p.m. Samaritan does not offer forensic services, walk-in, or 24-hour emergency services. If you need those services, we will work to find you services elsewhere. If we determine that your treatment needs require resources beyond what we can provide, we will assist you with a referral to an appropriate provider.

THE THERAPEUTIC PROCESS

Psychotherapy is a personal process and requires work and effort on your part. Therapy can only go as far the client is willing to go. Although there are no guarantees, psychotherapy can have benefits as well as risks. Since therapy often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration and helplessness. On the other hand, psychotherapy is also known to have benefits for people who participate in the process. Therapy often leads to better relationships, solution specific problems and significant reduction in feelings of distress.

In addition to traditional therapy, Eye Movement Desensitization and Reprocessing Therapy (EMDR) is a therapeutic modality used by many of the clinicians at Samaritan. EMDR is a research-support, evidence based therapy for trauma related disturbance and distress. EMDR is particularly useful with specific traumatic incidents, anxiety, panic and anger problems. EMDR includes the use of bilateral stimulation through eye movements, auditory tones and /or tapping in addition to a specific protocol of questions that the therapist will ask.

During our first few sessions we will discuss your needs and determine your goals for therapy. Throughout your therapy, please feel free to bring up any additional concerns as the process of therapy may reveal more to you about what you need. If you have any questions about procedures, please bring them up whenever they arise.

CANCELLATION & NO SHOW POLICY

Samaritan requires a 24 hour notice for cancellation. A "no show" is defined as a missed appointment with no prior notification or an individual who shows up 15 minutes or more after their scheduled appointment time. If a client **no shows** for two occurrences or has three consecutive cancellations, the client may be terminated from services. This policy can only be amended upon consultations with the clinical director.

CRISIS AND EMERGENCY SITUATIONS

Samaritan does not provide crisis or emergency services. Clinicians are generally available Monday-Friday from 9 a.m. to 4:30 p.m. if your situation warrants immediate action, YOU SHOULD IMMEDIATELY CALL 911 or GO TO THE NEAREST EMERGENCY ROOM for help.

MINORS

As an agency, we provide counseling to children/adolescents from the age of 4 and up with their parent or legal guardians' consent. Both parents will have to sign the informed consent in order to proceed with treatment for your child, (unless the minor is seeking treatment for substance use disorders). In order to authorize mental health treatment for your child, you must have either sole or joint legal custody of your child. We require you to provide Samaritan with a copy of the most recent custody decree that establishes custody rights of you and the other parent or otherwise demonstrates that you have the right to authorize treatment for your child. It is important to note that our agency will not make any determination or provide an expert opinion on the custody of a minor for any reason as it is beyond our scope of practice.

CLINICAL SUPERVISION

Services are provided by both licensed therapists as well as clinicians who may be pre-licensed or in training. Clinicians who are pre licensed provisionally licensed or in training are supervised by a licensed psychologist with an HSPP endorsement, who is accountable for the work done with you. Your clinician will inform you of their credentials, and furnish you with their supervisor's name and contract information at the onset of therapy. The Director of Clinical Services is responsible for supervision of all clinical work provided by Samaritan and as such has the same access to your medical records as the clinician who is being supervised.

CONFIDENTIALITY

Within certain limits, information revealed by you will be kept confidential and will not be revealed to anyone outside Samaritan without your written permission. The law protects the privacy of all communications between a client and a mental health provider. In most situations,

Indiana state law states that we can only release information to other healthcare providers that we reasonably believe are providing healthcare for you.

There are limits to confidentiality where your clinician is required by law to reveal information without your consent. These situations include: 1) if we receive a court order for your records, 2) if you are judged to be of an immediate danger to yourself or to another person, 3) if there is reason to suspect abuse or neglect of a child or vulnerable adult and /or 4) if you report any sexual misconduct, other unprofessional conduct, and/or impairment of a healthcare professional licensed in the State of Indiana. If such situations arise, we will attempt to notify you before taking action and will limit our disclosure of what is necessary under the laws and regulations of the State of Indiana.

COMMUNICATING WITH YOUR CLINICIAN

Clinicians are generally available Monday-Friday from 9 a.m. to 5:30 p.m. Our clinicians are often not immediately available by telephone as they will not answer the phone if they are with another client. When you clinician is unavailable, you may leave a message on their confidential voicemail. We make every effort to return your call within a business day you make it, with the exception of weekends and holidays. If your clinician will be unavailable for an extended time, they will provide you with the name of another staff member to contact, if necessary.

The use of email or text communication to our clients is limited strictly to administrative purposes. Please do no email or text clinician about clinical matters as it is not a secure form of communication and any data you send might not remain confidential. Email and text should never be sued to try and communicate with your clinician in an emergency.

SOCIAL MEDIA

Your confidentiality is extremely important to us. There are boundaries to the relationship that you have with your clinician. It is solely a professional relationship and in order to provide you with the best service possible, we strongly maintain that boundary. **Clinicians, supervisors and Samaritan staff are not permitted to accept friend requests** for Facebook, Instagram, Twitter, LinkendIn, or any other form of social media.

PROFESSIONAL FEES

Our professional fees range from \$130-\$150 for individual treatment dependent on the modality of treatment received and length of session. If you require other professional services, we will break down the hourly cost for you as soon as possible. These services include, but are not limited to: report writing, preparation of records or treatment summaries, and time spent performing any other service directly asked of the clinician.

You will be expected to pay for each session at the time it is held, or unless you have in network insurance coverage which requires another arrangement. Payment schedules for other professional services will be agreed to when they are requested. All co-pays or self-pay

payments will be collected at the time of session. If you do not have payment you must make alternative arrangements with our staff.

If your account has not been paid for more than 60 days and arrangements for payments have not been agreed upon, our agency has the option of using additional means to collect the outstanding debt, including but not limited to an assigned collection agency, and any and all legal remedies available.

INSURANCE REMIMBURSEMENT

In order to set realistic treatment goals and priorities, it is important to evaluate what resources you have available to pay for treatment. If you have health insurance policy, it will usually provide some coverage for mental health treatment. Our medical biller will verify your eligibility prior to the onset of treatment. However, you (not your insurance company) are responsible for full payment of our fee. It is very important that you find out exactly what medical health services your insurance policy will cover prior to commencement of treatment.

You should carefully read the section in your insurance coverage booklet that describes mental health services. If you have questions about the coverage, call your plan administrator. You must present your insurance card and form of identification at your initial meeting with your clinician. If you cannot provide an insurance card you will be responsible for the intake fee prior to the intake being completed.

PROFESSIONAL RECORDS

The laws and standards of our profession require that our agency maintains a treatment record for each client. These records will include information such as diagnosis, initial assessment, treatment plan, and progress notes. You will be charged an appropriate fee for any professional time spent in responding to information requests. Professional records are maintained through Therapy Notes, an electronic cloud based system. This system is compliant with HIPPA regulations. All records are maintained in accordance with Indiana law and the ethical standards for mental health professionals.

PROGRAM EVALUATION

Our agency regularly collects information to evaluate our treatment effectiveness and improve our clinical services. If data is collected from your file, all information will be de-identified and remain anonymous. You can decline to have your record used as part of program evaluation and this will not impact any services rendered.

CONTRABAND POLICY

Clients are not allowed to bring weapons or illicit drugs of any sort into any Samaritan offices. This would include but is not limited to items such as knives, guns, clubs and tasers. My signature acknowledges that I have read and understand the statement describing the nature of this program's services and limitations of service as well as the statements on Client's Rights and Important Information about Confidentiality.

I hereby consent that the assigned clinician may provide these services to me. I have received a copy of the notice of privacy practices and all of my questions regarding this information have been answered.

Client Name	Date	Signature of Client
Guardian Name	Date	Signature of Guardian
Witness Name	Date	Signature of Witness