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CLIENT BROCHURE AND INFORMED CONSENT

WELCOME!

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

This form answers some questions that clients often ask about therapy. It also contains information that is required to be communicated by certain laws and guidelines in my field. After you read this information, we can talk together about how these issues apply to you. Please read all of it. Write down any questions you have, so we can discuss them at our next meeting.

GENERAL INFORMATION ABOUT PSYCHOTHERAPY

I view psychotherapy as a collaborative partnership where you define the problems you would like to work on and I use my education, training, and experience to help you make changes in your life. I will ask you about important experiences, what they meant to you and how they made you feel. I will also ask questions about your day-to-day life events, relationships, feelings, thoughts and behaviors.

Psychotherapy is not like visiting a medical doctor for a procedure. You must be very actively involved in therapy in order for it to be effective. The process will require that you take responsibility for your feelings, thoughts and behaviors even when you have difficult experiences. You will need to make a significant effort to change. I will suggest that you do some work outside of our meetings such as practicing new skills, reading, and trying new ways of communicating with others. Therapy can help you to learn new ways of looking at your problems, better coping skills and it can help you to make changes in your life. Some changes will seem quick and easy, but most will take time and require repeated practice.

Our first few sessions will involve an evaluation of your needs. We will define some goals that you want to work toward. After the evaluation, I will explain my first impressions and make recommendations about how to proceed. I normally conduct an evaluation that will last from 2 to 4 sessions. During this time, we will both decide if I will be able to provide the services you need in order to meet your treatment goals. If we decide to continue with therapy, you will then become my client, and we will develop a treatment plan to follow. You should evaluate this information along with your own opinions of whether you feel comfortable working with me. Therapy involves a large commitment of time, money, and energy, so you should be very careful about the therapist you select.

If you have questions about my work and/or your therapy, we should discuss them immediately whenever they arise. If at any point during the evaluation or treatment process, one of us decides there is a better therapist or type of therapy for you, I will refer you to another provider. I will provide you with a list of resources, and it will be your responsibility to obtain the treatment you need.

Your participation in therapy is voluntary and you can discontinue it at any time.

LENGTH OF TREATMENT

The length of time spent in therapy and the frequency of visits varies from individual to individual. I almost always begin meeting with clients weekly because it allows me to get to know them as quickly as possible. Once you begin to reach your goals and we feel some progress has been maintained, we usually decrease visits. Eventually we will stop meeting. Stopping therapy should not be done without considerable thought, although either of us may decide to end it if we believe it is in your best interest. When you and/or I believe the work is done, we will end the psychotherapeutic relationship, and this ending is called termination. I will ask that you attend at least one termination session so that we can review the progress you have made and we can discuss any future goals that you may have.

RISKS AND BENEFITS OF PSYCHOTHERAPY

I do not work with clients I do not think I can help. Therefore, if we begin working together, I will enter our relationship with optimism about your progress.

There are risks and benefits when engaging in psychotherapy. Some of the risks may include, but are not limited to, an increase in upsetting feelings, an increase in unpleasant memories, and changes in your life that, even if they are positive in some ways, might cause problems in other ways.

I will challenge some of your assumptions and propose different ways of thinking about or handling situations. This may cause you to feel upset, angry, or to feel other unpleasant emotions. Attempting to resolve the issues that brought you into therapy may result in changes that you did not originally intend. What you learn about yourself in therapy may be a factor in your decisions to change behaviors in employment, substance use, schooling, housing, relationships or other aspects of your life. There is no guarantee that psychotherapy will yield positive or intended results.

While you consider these risks, you should know also that many benefits of therapy have been shown by scientists in hundreds of well-designed research studies. Some of the benefits may include, but are not limited to, a decrease in problematic thoughts, feelings, and behaviors and an increase in pleasant ones, better communication and coping skills, and improved quality of relationships. Clients also find that they achieve personal and professional goals.

You have a right to ask me about other treatments, their risks, and their benefits. If you might benefit from a treatment that I cannot provide, I will give you recommendations for other services. If I do this, I will discuss fully my reasons with you. You will be responsible for pursuing any treatments that you think are beneficial for you.

EXPECTATIONS ABOUT THE THERAPEUTIC RELATIONSHIP

Psychological services are best provided in an atmosphere of trust. You can expect me to be honest with you about your problems and progress. At times this information can be challenging to hear. I expect you to be honest with me about your expectations for services, your compliance with medication, your work inside and outside of our sessions, and any barriers to treatment. Just like in any relationship, there may be times that you feel upset with me and/or our relationship is stressed. I will be forthright in addressing my concerns if this occurs, and I expect you to do the same so that we can work through any issues that might inhibit your progress.

Based on what I learn about your problems, I may recommend you see another professional, complete a medical exam and/or suggest that you get an evaluation for medication. If you have not had a full physical within the last year, I always recommend that you complete one. If you do not follow my recommendations and if I believe that will jeopardize my ability to be of help to you, I may not be able to continue to see you. If this situation arises, we will discuss it.

Psychological assessment from other specialists can increase our understanding of your personality, psychological dynamics, intellectual and emotional resources, or other areas so it may help us plan or improve your therapy. If it seems like this would be helpful to you, I will discuss this with you.

If another professional treats you, I will coordinate my services with him or her if you agree with this. In some cases if you do not allow me to speak with other professionals, I may not be able to provide services to you.

As a professional, I will use my best knowledge and skills to help you. This includes following the standards of the American Psychological Association, or APA. In your best interest, the APA puts limits on the relationship between a therapist and a client, and I will abide by these. A summary of these limits is as follows:

1. I am licensed and trained to practice psychology. I am not able to give you input from other professional viewpoints.
2. State laws and the rules of the APA require me to keep what you tell me confidential. You can trust me not to tell anyone else what you tell me, except in a few unusual situations. I explain what those are in the “Confidentiality” section of this form.
3. If you ever become involved in a divorce or custody dispute, or any other legal matter (such as a lawsuit over injuries), I will not provide my records, or evaluations, depositions, or testimony in court unless I am required to under court order and have no choice but to do so or you require that I release that information. There are several reasons for this: (1) I may not possess the professional skills to make decisions about the issues involved; (2) therapy often involves full disclosure of information that you might not want to have revealed in court, and if you are holding back information because of that fear, our work will not be as productive as it could be; (3) my statements will be seen as biased in your favor because we have a therapy relationship; (4) what I might say in testifying or being deposed might change our therapy relationship, and I must put that relationship first; and (5) often information can be used by the opposing counsel to hurt your case. If you want custody evaluations and recommendations, I will be happy to refer you to those with this expertise, and it is your responsibility to follow through if you are interested in pursuing this.
4. Even if you invite me, I will not attend your personal events.
5. As your psychologist, I will not celebrate holidays or give you gifts. I may not notice or recall your birthday and will not accept any costly gifts from you.

CONSULTATIONS

I attend peer consultation groups in order to continue my professional development. At times I will consult with various colleagues and specialists about our ongoing work. I do not disclose your name or any specific information through which you might be identified. I change or skip some information to protect further your identity. I share only what the other professional needs to know in order to be of help to me. The focus is on getting feedback about my work so that I can be of the most help to you. Although you will not be identifiable during consultations, these professionals are still required to keep all the information we discuss private.

CONFIDENTIALITY

General Information

My professional ethics, and the laws of this state, prevent me from telling anyone else what you tell me unless you give me written permission. As a way of maintaining the confidentiality of our relationship, if we see each other outside the office or in a social setting, I may not say hello or talk to you at all unless you initiate contact with me. You are always free to greet me, and I will be happy to say hello. If I am with someone else at the time, my policy is not to introduce you to him or her, but if that is unavoidable, I will introduce you without identifying you as my client.

The laws and rules about confidentiality are complicated, so please raise your questions at any time. If you have special or unusual concerns, I strongly suggest that you talk to a lawyer to protect your interests legally and to act in your best interest. I cannot give you legal advice.

I work in a building with other businesses, and each of the professionals provides a variety of services. I share an office suite with other professionals with a common waiting room. You will likely encounter other individuals as you walk through the building and as you sit in the waiting room. Out of respect to those individuals, I ask that you not disclose the name or identity of anyone you might see.

Any information that you share with me outside of therapy sessions will not be considered protected or confidential by a court or the legal system.

If information is shared with a third party about your treatment by your request or by court order, I cannot control how that information is protected or stored by that individual and/or organization, nor am I responsible for what they do with the content.

Exceptions to Confidentiality

By law, I cannot promise that *everything* you tell me will *never* be revealed to someone else. In all but a few rare situations, your confidentiality (that is, the privacy of what you tell me) is protected by federal and state laws and by the rules of my profession. Exceptions to this include, but are not limited to, the following:

1. When you or other persons are in potential danger, the law requires me to tell others about it.
 - a. If I suspect that you intend to hurt another person, I am required to try to protect that person. I may have to tell the person, the police or other emergency personnel, or possibly try to have you hospitalized.
 - b. If I suspect that it is likely you might try to harm yourself, I am required to try to protect you. I may have to call your family members or others who can help protect you, seek to hospitalize you, and/or call emergency personnel such as the police.
 - c. If I suspect that you are abusing a child, an elderly person, disabled person, or another vulnerable person, I must file a report with a state agency. To “abuse” means to neglect or not take care of another person; to hurt that person (physically or mentally); or to sexually molest, touch, or harm that person. I do not have any legal power to investigate the situation. I must report all suspicion. If this might be your situation, you will need to seek another provider, as I do not work with clients dealing with issues related to perpetrating abuse and/or neglect. I also recommend that you consult with an attorney about your legal rights.
 - d. In an emergency where your life or health is in danger and I cannot get your permission, I may give another professional some information to get you the help you need. I will try to get your permission first, but if I cannot, I will act.

In any of these situations, I would reveal only the information that is needed to protect you or the other person. If such a situation does occur, I will try to discuss the situation with you fully before I do anything, but in some situations, I might act without speaking with you.

If you do not pay your bill as required, I can take action to get reimbursed, which may include contacting a collections agency or an attorney. In most of these situations, the only facts I release regarding a client’s treatment are his or her name, the kind of services provided, and the amount due.

Court and/or Legal Proceedings

I do not work with clients who are involved with and/or anticipate becoming involved with any court and/or legal proceeding, court ordered for treatment, or are seeking evaluation for workers' compensation, Social Security Disability Insurance, and/or Homeland Security. You must seek another provider if you are in any of these situations.

During the course of treatment, clients can become involved in unanticipated court and/or legal proceedings. If this happens, you can often prevent me from testifying in court about what you have told me. This is called your "privilege," and it is your choice to prevent me from testifying or to allow me to testify. However, there are a few situations where a judge or court may order me to testify and/or share your records, and I must comply. These situations include, but are not limited to:

1. Child custody or adoption proceedings, where your fitness as a parent is questioned or in doubt.
2. Cases where your emotional or mental condition is important information for a court's decision.
3. A malpractice case or an investigation of me or another therapist by a professional group or licensing board.
4. A civil commitment hearing to decide if you will be admitted to or continued in a psychiatric hospital.

It is important that you understand, however, that if a judge or court orders me to provide information about you in any situation, by law, I must comply.

Emergency Coverage

When I am out of town or unavailable, another therapist will be available to help my clients in an emergency. I must give this professional some minimal information about my clients, but he or she will keep it confidential, obey his or her professional codes of ethics and comply with our federal and state laws/regulations. I will not give your name or identifying characteristics without your permission.

Billing and Insurance

Your insurance company may require that I share information about you in order for them to pay for your services. If you choose to use your insurance, I must comply with their requests. Clients who do not wish to have information shared can choose to pay me without using their insurance. Specifically:

1. If you use your health insurance to pay a part of my fees, the insurance company, the managed care organization (if you have one), and perhaps your employer's human resources office may require me to provide information about how well you function in many areas of your life, your social and psychological history, and your current symptoms. I may also be required to provide a treatment plan and information about your therapy.
 - a. If you have been sent to me by your employer's employee assistance program (EAP), the program's staffers may require some information.
 - b. I will share your identifying information including, but not limited to, your name, address, phone number, diagnosis, employer, DOB, or Social Security number with my billing service (Claims Connections, Plattsburg, NY) as well as my business manager.
 - c. As stated above, if your account with me is unpaid and we have not arranged a payment plan, I can use legal means to get paid. Generally the only information I will give to a court, a collection agency, or a lawyer will be your name and address, the dates we met for professional services, and the amount due to me.

Children and Families

When I treat children, parents/guardians are frequently involved somewhat in their treatment. I ask that parents/guardians respect the client's confidentiality. While I might provide general information, my policy is to keep the details of the sessions private. I do not work with children if their parent/guardian wants details about his or her treatment. If you are a parent or guardian wanting specific information, you need to seek services from another

provider. Ultimately, I must, answer questions parents/guardians ask, but I may decide to discontinue services if these questions are not consistent with my policy to keep the details of sessions private.

In cases where I treat several members of a family (parents and children, or other relatives), the confidentiality situation can become very complicated. I may have different duties toward different family members. At the start of our treatment, we must all have a clear understanding of the purposes of our meeting and of my role. We can then understand any limits on confidentiality that may exist.

If you are seeing me for marriage counseling or couples therapy, you must agree at the start of treatment that if you eventually decide to divorce, you will not request my testifying for either side. That way we can focus on what is best for your relationship. The court, however, may order me to testify.

If parents/guardians provide information about their child who is a client, I do not need to keep this information confidential from the client and I may choose to share it with him or her. Parents/guardians should never provide me with information that they do not want shared with their child. If parents want to work with a provider with a different policy on this, they need to seek services elsewhere.

Recording Sessions

I will not electronically record your therapy sessions, and you also may not do so.

Releasing Information by Your Request

It is your legal right that our sessions and my records about you are kept private. If you want information to be released, I will ask you to sign a consent form before I can talk about you and/or send copies of my records about you to anyone else. Please refer to the "Records" section of this form for specific information about sharing information from your file.

It may be beneficial for me to consult with your primary care provider with regard to your psychological treatment or to discuss any medical problems for which you are receiving treatment. It is typically beneficial for me to consult with any professionals providing medications for you for mental health issues as well as any providers providing other mental health services to you.

Some insurance may require that I consult with certain professionals or they will not pay for my services to you. I cannot change their rules. Medicare requires that I notify your physician, by telephone or in writing, concerning services that are being provided by me unless you request that notification not be made.

Some insurances will require that I speak with one of their representatives by phone to answer their questions about your treatment or they will not pay for my services.

RECORDS

The laws and standards of my profession require that I keep treatment records. If another professional or anyone else requests your records, I will make attempts to discuss this with you. You are entitled to ask for your entire record to be released or that a summary be released instead. If you want any information to be released verbally and/or in writing, you will need to sign a consent form. This form specifies what information is to be shared, with whom, and why. You may read a blank copy of this form at any time by request. If you have questions, please ask me.

It is my policy to destroy adult clients' records 10 years after our last meeting. I destroy records for minor clients 10 years after their 18th birthday. Until then, I will keep your case records in a safe place and make them available when you authorize their release or if I am required by law to release them.

If I must discontinue our relationship because of illness, disability, or other unforeseen circumstances, I will transfer your records to another clinician who will make sure they are kept safe, confidential, and available when you want them, and then destroy them someday.

If we do family or couples therapy (where there is more than one adult present), and you want to have my records of this therapy sent to anyone, all of the adults present will have to sign a consent form.

As previously stated, health insurance companies can ask for information on your symptoms, diagnoses, progress, and outcomes. My policy is to provide only as much information as the insurance company will need to pay your benefits. This information will become part of your permanent medical record. I will let you know whether a company has asked for this and what it has asked for. If the company does not get the information it asks for, it may refuse to pay your benefits for our treatment. For more on these issues, please read my Notice of Privacy Practices.

You can review your own records. You will need to request this in advance, and we will schedule a time to meet. You may add to them or provide more information, but you cannot change or ask that I change any part of them. You can have copies of your records, but you will have to assume the risks of loss of confidentiality when you receive and store your copies. If I believe that it might be in some way harmful for you to read your records, I may suggest that we review them together before I provide them or that I provide you with a summary of the records in place of the entire record. You may not examine records created by anyone else that you have had sent to me, but you can contact him or her to request those records.

INFORMATION ABOUT APPOINTMENTS

Note Taking

I usually take notes during meetings because it helps me to organize my thoughts, and I am required to document certain information in your file. You may find it helpful to take notes as well or to bring notes into sessions. Again, neither of us can record the sessions in any manner.

Cancellations and No-Shows

I consider our meetings very important and make them a priority over other activities, and you will need to do the same. An appointment is a commitment to our work. A cancelled appointment slows our progress, so please try not to miss sessions. Your session time is reserved for you.

We agree to meet at my office and to be on time. In the rare event that I am unable to start on time, I ask your understanding, and you will receive the full time agreed to or be charged proportionately. 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.

You will be charged \$65 for sessions cancelled with less than 24 hours of notice, unless I am able to fill the appointment time or reschedule you in that same week. Please note that it is rare for me to be able to reschedule things with less than 24 hours of notice. It is also usually impossible for me to find another time for you to come in during the same week. I will try my best, however, to find another time for you and/or to fill your spot if you do cancel. If you do not show up for a session, you will be charged the full fee based on what your insurance pays or what you pay per session. Your insurance will not cover these charges, and you will be responsible to pay.

If you miss two or more sessions within a 6-month time period or if I feel that your absences are inhibiting your treatment progress, I may ask you to continue with another provider. I will provide a list of potential sources, and it is your responsibility to seek and obtain care. If you are more than 10 minutes late for an appointment, you will forfeit that appointment time and be charged a no show fee.

Inclement Weather

If the weather is bad and driving is dangerous, I will call you to discuss whether or not to cancel our meeting. If I am unable to reach you, I will change the message on my voicemail if my schedule changes. If the road conditions are hazardous, please call my office before traveling.

FEES, PAYMENTS AND BILLING

Please be sure you understand the information about billing and insurance summarized in the “Confidentiality” section of this form.

My billing service is Claims Connections located in Plattsburg, NY. Your signature below authorizes me to release information about you as required by your insurance company and as needed for billing purposes to Claims Connections and to my Business Manager.

You are responsible for ensuring that I am paid for my services to you. My current regular fees are as follows. I reevaluate my fees from time to time based on the costs of running my business. You will be notified of any changes.

Type of Session	Cost
Intake	\$250
53-Minute Session	\$200
45-minute session	\$175
Family session	\$225

I require that clients pay all copays, deductibles and session fees at the start of each session. I do not bill for these fees. If you have insurance, my billing service will submit bills to your insurance company for the portion that they will pay. Please be ready to pay before each session begins so that our time will be used fully. I accept cash and checks.

Work Outside of Session Time

I do not charge for routine documentation, phone calls, consultations, reading, research and/or other logistical duties providing they do not exceed 15 minutes of time per week. All other work outside of your session is billed as follows and pro-rated as appropriate. Some services may require payment in advance. We will discuss the services and any fees involved in advance unless there is there is an emergency situation that disallows due to the need for an immediate response from me.

Type of Service	Cost
Consultations and all other services	\$200
Legal and Court related work	\$250

Services typically not covered by insurance that might be billed to you include, but are not limited to, the following:

1. *Telephone Consultations*

- a. I believe that telephone consultations may be suitable or even needed at times in our therapy. If I need to have telephone conferences with other professionals as part of your treatment, you will be billed for these at the same rate as for regular therapy services.
2. *Extended Sessions and Phone Contact*
 - a. Occasionally it may be better to schedule an extended session. This extra time will be charged on a pro-rated basis.
 - b. If we feel that our work together calls for it, I will make special arrangements for telephone contact, and this service will be charged at my usual rate. The costs will be billed at the session rate.
3. *Consultation*
 - a. In addition to providing psychotherapy, I consult on a variety of specific issues such as Sports and Performance Psychology, Giftedness, and Career Interests. If you decide to see me for one of these services, we will sign a separate Informed Consent.
4. *Formal Assessment*
 - a. Testing fees include the time spent with you, the time needed for scoring and studying the test results, any consultations necessary, the cost of the test, and the time needed to write a report on the findings. The amount of time involved depends on the tests used and the questions the testing is intended to answer.
5. *Reports*
 - a. I may have to read and/or write reports for you.
6. *Court and Legal Tasks*
 - a. If I am involved in any legal related proceedings, including but not limited to, communication verbally or in writing with attorneys or other legal professionals, completing a deposition or appearing in court about your work with me (regardless of the reason), or if another party requires my involvement, you will be billed. In addition, you may be billed for my travel time, at the federal mileage rate, for the distance travelled. If I am required to stay in a hotel in order to participate in a legal proceeding, you will be required to pay for my accommodations at a reasonable rate.
7. *Other Services*
 - a. Charges for other services, such as hospital visits, consultations with other therapists, research, home visits, or school meetings will be based on the time involved in providing the service and billed at the session rate.

PAYMENT AND INSURANCE

When you sign the end of this form you will be authorizing me to:

1. Release your information to your insurance company as required by your insurance plan;
2. Have your insurance benefits be paid directly to Lisa M. Stephen, Ph.D., P.C.;
3. Communicate with your insurance company, and you also are allowing my business manager and/or my billing service to do so as well.

I choose to contract with an insurance company and to accept their reimbursement fees in order to be of help to my clients. I am not an employee of any insurance company, nor am I required to participate with them. I cannot provide you with any information about the plan you purchased.

Your health insurance policy is a contract between you and your insurance company, and it does not guarantee payment for my services. I had no role in deciding what your insurance covers. Your employer decided which services will be covered, which will not be covered, and how much you have to pay. You are responsible for checking your insurance coverage, deductibles, payment rates, copayments, and so forth and, as previously stated, these fees need to be paid at the beginning of each session. Please read your plan's booklet under coverage for "Outpatient Psychotherapy," "Behavioral Health," or "Treatment of Mental and Nervous Conditions," or contact your insurance company for assistance. You may also call your employer's benefits office for information. It is very important that you find out exactly what mental health services your policy covers so that you understand your financial commitment. It is

important to know that you always have the right to pay for mental health services yourself to avoid any issues with your insurance company if that is your preference.

Please bring your insurance card to our first meeting, or I will not be able to bill your insurance, and you will be responsible for the fees in full.

Our agreed-upon financial arrangements will continue as long as I provide services to you. You will need to tell me in person, by telephone, or by certified mail that you wish to end the relationship. You have a responsibility to pay for any services you receive before we end the relationship.

Outstanding Balances and Account Information

If your insurance company does not pay within a reasonable period of 60 days, I will expect you to pay the full amount and wait for your insurance company to reimburse you if my contract with the company allows for this. Of course, if I receive a payment from the company after you have paid me, I will refund your overpayments.

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

If your account has not been paid for more than 60 days and arrangements for payment have not been agreed upon, I have the option of using legal means to secure the payment. If such legal action is necessary, its costs will be included in the claim.

If you think you may have trouble paying your bills at times, please discuss this with me. If a balance remains unpaid, I must stop therapy with you. I will provide you with referrals if you wish to continue elsewhere, and it will be your responsibility to follow through if you choose to do so.

CONTACTING ME

I cannot promise that I will be available at all times, and it is usually difficult to reach me directly by phone. Please leave a message. I will return your call as soon as I can. Generally, I will return messages on Mondays, Tuesdays, Wednesdays and Thursdays, excluding holidays.

If you have a mental health crisis, call my office at (802) 355-9299 and follow the instructions. If you cannot wait for a return call, call 911 immediately or go to your local emergency room.

If I don't return your message within 48 business hours, please assume that a technical problem has occurred and call back.

CHILDREN AND BUILDING ISSUES

You will be charged for any damage to, or theft of, property in this office or on the premises by you or anyone for whom you are legally responsible. I cannot be responsible for any personal property or valuables you bring into my office suite. If you think you will need to have anyone under the age of 18 waiting for you while you are in session, we need to discuss this in advance. Generally speaking children are not allowed to wait in the waiting room without a parent/guardian present.

Please note that although I share my office suite with other professionals, we are not in business together as partners, employers, or employees. We are all independent, licensed professionals with our own businesses.

STATEMENT OF PRINCIPLES AND COMPLAINT PROCEDURES

It is my intention to abide by all the rules of the APA 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 as soon as possible. Our work together will be compromised if your concerns are not worked out. Some issues that arise between us may be clinically relevant to other relationships in your life. I will make every effort to hear any complaints you have and to seek resolution. If you feel that I have treated you unfairly or have broken a professional rule, please tell me. You can also contact the Vermont state licensing board for the discipline under which I (a psychologist) or any professional practices in order to file a complaint. You will receive a separate form explaining this with regard to my practice.

In my practice as a psychologist, I do not discriminate against clients because of any factors including, but not limited to, age, sex/gender, sexual orientation, marital or family status, race, color, religious beliefs, ethnic origin, place of residence, veteran status, physical disability, health status, or criminal record. I do only see clients whom I think I can help when I have the sufficient training to do so and, consequently, I might refer clients to more appropriate sources when I determine that is in their best interest. This is a personal commitment, as well as a requirement by some federal, state, and local laws and regulations. I will always take steps to advance and support the values of equal opportunity, human dignity, and racial, ethnic, and cultural diversity. If you believe you have been discriminated against, please bring this matter to my attention immediately.

INFORMED CONSENT SIGNATURE FORM

We will review the content of this document at our first meeting. You will have ample opportunity to have your questions answered. You will then sign the Informed Consent Signature Form documenting that this process was completed. Of course, you may review the contents of this form with me whenever you request.